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THE ACCURACY OF CERTIFIED CAUSES OF DEATH.

ITS RELATION TO MORTALITY STATISTICS AND THE INTERNATIONAL LIST.

Report of a committee of the Vital Statistics Section of the American Public Health Association, composed as follows: Committee:—Haven Emerson, chairman; William H. Guilfooy, E. H. Lewinski-Corwin, Louis I. Dublin, Charles Norris, T. Warfield Longcope, W. R. Williams; George H. Van Buren, executive secretary;

This report is a summary of the conclusions of a committee appointed by the Section on Vital Statistics of the American Public Health Association to consider the accuracy of certified causes of death and their relation to mortality statistics and the International List of Causes of Death.

At the meeting of the Section on Vital Statistics, held September 10, 1915, at Rochester, N. Y., Dr. Haven Emerson, commissioner of health of New York City, read a paper, a synopsis of which follows:

Reliability of Statements of Cause of Death from the Clinical and Pathological Viewpoints.¹

While completeness of records of death is desirable, it is of no more importance than the accuracy of the causes themselves as stated on the death certificates.

The primary necessity for reliable and adequate statement of cause of death is obvious. The high percentage of inaccuracy in certificates of death is well known to registrars, to life insurance companies, and to pathologists, who can compare clinical diagnoses with the demonstrated cause of death at the autopsy.

If the 189 titles of the International List are studied in the light of present-day knowledge of clinical and pathological experience it will appear that there is no plausible guarantee of accuracy in at least 41 per cent of the certificates as now presented to the registrar of records of the New York City Health Department.

In this 41 per cent we find 2,875 deaths in 1914 attributed to causes that can be accepted as reliable only after autopsy and 27,995 which are capable of verification by exact observations, as by chemical, bacteriological, and biological tests before death, but failing such

¹ For the full text of this paper see the American Journal of Public Health, July, 1916.

specific proof, represent no reliable statement of death without autopsy.

It is proposed to separate the reliable or probably correct statements of cause of death from the remainder, so that a beginning may be made in permanently accurate statistics of deaths on which alone future progress in prevention of disease can be based.

The 76 titles of the International List which are recommended for separation as unreliable unless verified by autopsy or supported by specific observation or laboratory proof are the following numbers: 4, 10, 11, 23, 25, 29, 30, 31, 37, 40, 41, 45, 46, 48, 53, 54, 55, 57, 58, 59, 60, 61, 63, 64, 65, 66, 67, 68, 69, 70, 71, 73, 74, 77, 79, 97, 81, 82, 83, 84, 85, 96, 98, 101, 102, 103, 108, 109, 110, 111, 112, 113, 114, 115, 116, 118, 122, 123, 124, 130, 132, 140, 151, 152, 153, 154, 155, 156, 158, 164, 165, 169, 186, 187, 188, 189.

To submit this plan to the critical judgment of clinicians, pathologists, statisticians, and health officers seemed necessary before the section could consider so radical a step as the one proposed.

After the discussion of Dr. Emerson's paper the chairman was authorized to appoint a committee to consider the reliability of the causes of death as specified in the International List of Causes of Death. The committee as appointed was as follows:

Haven Emerson, chairman.

William H. Guilfoyle.

E. H. Lewinski-Corwin.

Louis I. Dublin.

Warfield T. Longcope.

Charles Norris.

W. R. Williams.

George H. Van Buren.

Meetings were held in New York City on November 17 and December 14, 1915, and January 11, February 8, March 14, April 11, May 3, and June 6 and 7, 1916. At each of these the chairman, Dr. Haven Emerson, presided; Mr. George H. Van Buren was made executive secretary.

The November and December meetings were devoted largely to discussion of the committee's status, mission, and powers. It was appointed primarily with the idea that it would make recommendations covering the 189 titles of the International List of Causes of Death with a view to separating them into two classes:

(a) Those not to be accepted as reliable without autopsy or without specific supporting data upon which diagnosis was based.

(b) Those to be accepted as reliable without autopsy or other verification.

It was pointed out, however, that as the committee was one on the accuracy of certified causes of death, it should also consider:

(a) The validity of terms included under each title, i. e., the probability that each term, when reported as a cause of death, represents the exact morbid condition covered

by the title heading. It was agreed that this phase of the subject be considered secondary to that of determining the question of the reliability of the titles as described above. In the course of the committee's discussions, however, it frequently became necessary to discuss the question of reliability on the basis of each included term. This is particularly true of titles under which are included both diseases that are seldom fatal and those that are surely fatal or in which the prognosis is grave.

(b) The fact that a term's reliability as a statistical entity when reported as a cause of death depends, not only upon the fact that the disease which it describes was surely present, but also upon its status as descriptive of the *primary* cause of death. As an instance of this there are a number of titles which the committee might assign to the acceptable class because diagnosis of the conditions covered by them are certain; nevertheless, statistics based on these very returns would be grossly inaccurate, because there would be inaccuracy in the statement of cause of death through the omission of the *primary* cause, even though the terminal condition, and the only one reported, were one that is acceptable without autopsy. It was agreed that this was a phase that has an important bearing on what constitutes a reliable statement of cause of death and that the committee should give it consideration. It was decided, however, that it should, so far as possible, be discussed as a separate and distinct problem upon which the committee should make recommendations.

In considering the International List from the viewpoints outlined above, and in making its recommendations, the committee has been mindful of the fact that, as is plainly set forth in the "Introductory" of the manual, "The International List of Causes of Death makes no pretension of being a proper nomenclature of diseases, or of including a scientific classification of diseases. It is only a practical working list whereby statistical compilers can assign medical terms reported by physicians as causes of death to certain more or less definite titles representing individual diseases or groups of diseases of similar character." The committee realizes that such a list necessarily contains many terms that are unscientific, inaccurate, and indefinite, as well as some that are obsolete. It has borne in mind, however, that many of these expressions are now, and will continue to be, encountered in the practical experience of registration offices, and that since it is not always practicable or possible to obtain more satisfactory statements, it is necessary for registration and compiling offices to use a list like the International List of Causes of Death in order that such expressions, together with the definite and scientific terms, may be compiled uniformly and under the titles which are most likely to cover the conditions reported. When it recommends, therefore, that titles or terms in the list be "eliminated" it means that they should not be mentioned in any publication of the Bureau of the Census or of State or municipal registration offices in such a way as to convey to physicians in general the impression that their use is sanctioned by these offices. Whenever it is necessary to include such terms they should be printed with some identifying sign to show that they are not approved as statements of cause of death.

The committee does not propose that mortality statistics along the lines it recommends be substituted for those now published annually

by the Bureau of the Census. It does believe that as a *purely supplemental study* tables should be published showing the number of deaths compiled on the basis of specific supporting data.

If supplemental statistics are to be compiled of deaths in which the compiling office is to be certain that it is classifying under each title of the International List of Causes of Death only those deaths which were caused by conditions correctly assignable to that title, the compiling office must be sure not only that the diagnosis on the death certificate is correct so far as it goes but that it includes a statement of the *primary* cause of death.

The section on vital statistics of this association has no function of greater importance than that of cooperating with the Bureau of the Census, State and municipal registration offices, and other bureaus, corporations, and persons interested in vital statistics. It is, therefore, very proper that it should consider the questions raised by Dr. Emerson in his paper and register its approval or disapproval of the procedure suggested. In order to do this to good advantage, the section voted to authorize the appointment of the committee whose conclusions follow. These conclusions, or as many of them as are approved by this section, will be submitted to the International Commission charged with the revision of the International List, which will meet in 1919. The conclusions should receive careful consideration at the hands of the Section on Vital Statistics. In this connection, attention is directed to the fact that if adopted by the section and ratified by the commission a practical reconstruction of the International List will result. The committee has recommended the addition of a number of titles to the present list, among which may be mentioned *Acute poliomyelitis*, *Epidemic cerebrospinal meningitis*, *Septic sore throat*, *Diseases of the thymus gland*, *Diseases of the parathyroid*, *Diseases of the pituitary body*, *Hodgkin's disease*, *Caisson disease*, *Diseases of the pancreas*, and others. It is recommended that several of the present titles be eliminated, among which are *Cholera nostras*, *Mycosis*, *White swellings*, *Disseminated tuberculosis*, and others. The time allotted to the consideration of the subject at the meetings in Cincinnati will be entirely too short. Each member who has signified his intention of attending the Cincinnati meetings will be supplied several weeks before the meeting with a copy of this report in the hope that he will give to it, to the full extent that time will permit, the thought and study that its importance warrants and will be prepared to give to the section the benefit of his criticisms with clearly stated reasons for each one of them. In this connection, it is important that each member of the section take with him to Cincinnati his copy of the Manual of the International List of causes of death in order that each one present at the meetings of the section may have before him the subject matter which it is proposed to revise.

The Detailed International List of Causes of Death.

I.—GENERAL DISEASES.

1. Typhoid fever.
2. Typhus fever.
3. Relapsing fever.
4. Malaria.
 - 4a. *Including:* Malarial cachexia.
5. Smallpox.
6. Measles.
7. Scarlet fever.
8. Whooping cough.
9. Diphtheria and croup.
 - 9a. *Including:* Croup.
10. Influenza.
11. Miliary fever.
12. Asiatic cholera.
13. Cholera nostras.
14. Dysentery.
15. Plague.
16. Yellow fever.
17. Leprosy.
18. Erysipelas.
19. Other epidemic diseases.
20. Purulent infection and septicæmia.
21. Glanders.
22. Anthrax.
23. Rabies.
24. Tetanus.
25. Mycoses.
26. Pellagra.
27. Beriberi.
28. Tuberculosis of the lungs.
29. Acute miliary tuberculosis.
30. Tuberculous meningitis.
31. Abdominal tuberculosis.
32. Pott's disease.
33. White swellings.
34. Tuberculosis of other organs.
35. Disseminated tuberculosis.
36. Rickets.
37. Syphilis.
38. Gonococcus infection.
39. Cancer and other malignant tumors of the buccal cavity.
40. Cancer and other malignant tumors of the stomach, liver.
41. Cancer and other malignant tumors of the peritonæum, intestines, rectum.
42. Cancer and other malignant tumors of the female genital organs.
43. Cancer and other malignant tumors of the breast.
44. Cancer and other malignant tumors of the skin.
45. Cancer and other malignant tumors of other organs or of organs not specified.
46. Other tumors (tumors of the female genital organs excepted).
47. Acute articular rheumatism.
48. Chronic rheumatism and gout.
49. Scurvy.
50. Diabetes.
51. Exophthalmic goitre.
52. Addison's disease.
53. Leuchæmia.
54. Anæmia, chlorosis.

I.—GENERAL DISEASES—Continued.

55. Other general diseases.
 56. Alcoholism (acute or chronic).
 57. Chronic lead poisoning.
 58. Other chronic occupation poisonings.
 59. Other chronic poisonings.
- ### II.—DISEASES OF THE NERVOUS SYSTEM AND OF THE ORGANS OF SPECIAL SENSE.
60. Encephalitis.
 61. Simple meningitis.
 - 61a. *Including:* Cerebrospinal fever.
 62. Locomotor ataxia.
 63. Other diseases of the spinal cord.
 64. Cerebral hæmorrhage, apoplexy.
 65. Softening of the brain.
 66. Paralysis without specified cause.
 67. General paralysis of the insane.
 68. Other forms of mental alienation.
 69. Epilepsy.
 70. Convulsions (nonpuerperal).
 71. Convulsions of infants.
 72. Chorea.
 73. Neuralgia and neuritis.
 74. Other diseases of the nervous system.
 75. Diseases of the eyes and their annexa.
 76. Diseases of the ears.

III.—DISEASES OF THE CIRCULATORY SYSTEM.

77. Pericarditis.
78. Acute endocarditis.
79. Organic diseases of the heart.
80. Angina pectoris.
81. Diseases of the arteries, atheroma, aneurysm, etc.
82. Embolism and thrombosis.
83. Diseases of the veins (varices, hæmorrhoids, phlebitis, etc.).
84. Diseases of the lymphatic system (lymphangitis, etc.).
85. Hæmorrhage; other diseases of the circulatory system.

IV.—DISEASES OF THE RESPIRATORY SYSTEM.

86. Diseases of the nasal fossæ.
87. Diseases of the larynx.
88. Diseases of the thyroid body.
89. Acute bronchitis.
90. Chronic bronchitis.
91. Bronchopneumonia.
92. Pneumonia.
93. Pleurisy.
94. Pulmonary congestion, pulmonary apoplexy.
95. Gangrene of the lung.
96. Asthma.
97. Pulmonary emphysema.
98. Other diseases of the respiratory system (tuberculosis excepted).

V.—DISEASES OF THE DIGESTIVE SYSTEM.

99. Diseases of the mouth and annexa.
100. Diseases of the pharynx.
101. Diseases of the œsophagus.
102. Ulcer of the stomach.

The Detailed International List of Causes of Death—Continued.

V.—DISEASES OF THE DIGESTIVE SYSTEM—CON.

- 103. Other diseases of the stomach (cancer excepted).
- 104. Diarrhoea and enteritis (under 2 years).
- 105. Diarrhoea and enteritis (2 years and over).
- 105a. *Including:* Due to alcoholism.
- 106. Ankylostomiasis.
- 107. Intestinal parasites.
- 108. Appendicitis and typhlitis.
- 109. Hernia, intestinal obstruction.
- 110. Other diseases of the intestines.
- 111. Acute yellow atrophy of the liver.
- 112. Hydatid tumor of the liver.
- 113. Cirrhosis of the liver.
- 113a. *Including:* Due to alcoholism.
- 114. Biliary calculi.
- 115. Other diseases of the liver.
- 116. Diseases of the spleen.
- 117. Simple peritonitis (nonpuerperal).
- 118. Other diseases of the digestive system (cancer and tuberculosis excepted).

VI.—NONVENEREAL DISEASES OF THE GENITO-URINARY SYSTEM AND ANNEXA.

- 119. Acute nephritis.
- 120. Bright's disease.
- 121. Chyluria.
- 122. Other diseases of the kidneys and annexa.
- 123. Calculi of the urinary passages.
- 124. Diseases of the bladder.
- 125. Diseases of the urethra, urinary abscess, etc.
- 126. Diseases of the prostate.
- 127. Nonvenereal diseases of the male genital organs
- 128. Uterine hemorrhage (nonpuerperal).
- 129. Uterine tumor (noncancerous).
- 130. Other diseases of the uterus.
- 131. Cysts and other tumors of the ovary.
- 132. Salpingitis and other diseases of the female genital organs.
- 133. Nonpuerperal diseases of the breast (cancer excepted).

VII.—THE PUERPERAL STATE.

- 134. Accidents of pregnancy.
- 135. Puerperal hemorrhage.
- 136. Other accidents of labor.
- 137. Puerperal septichæmia.
- 138. Puerperal albuminuria and convulsions.
- 139. Puerperal phlegmasia alba dolens, embolus, sudden death.
- 140. Following childbirth (not otherwise defined).
- 141. Puerperal diseases of the breast.

VIII.—DISEASES OF THE SKIN AND OF THE CELLULAR TISSUE.

- 142. Gangrene.
- 143. Furuncle.
- 144. Acute abscess.
- 145. Other diseases of the skin and annexa.

IX.—DISEASES OF THE BONES AND OF THE ORGANS OF LOCOMOTION.

- 146. Diseases of the bones (tuberculosis excepted).
- 147. Diseases of the joints (tuberculosis and rheumatism excepted).
- 148. Amputations.
- 149. Other diseases of the organs of locomotion.

X.—MALFORMATIONS.

- 150. Congenital malformations (stillbirths not included).

XI.—EARLY INFANCY.

- 151. Congenital debility, icterus, and sclerema.
- 152. Other causes peculiar to early infancy.
- 153. Lack of care.

XII.—OLD AGE.

- 154. Senility.

XIII.—EXTERNAL CAUSES.

- 155. Suicide by poison.
- 156. Suicide by asphyxia.
- 157. Suicide by hanging or strangulation.
- 158. Suicide by drowning.
- 159. Suicide by firearms.
- 160. Suicide by cutting or piercing instruments.
- 161. Suicide by jumping from high places.
- 162. Suicide by crushing.
- 163. Other suicides.
- 164. Poisoning by food.
- 165. Other acute poisonings.
- 166. Conflagration.
- 167. Burns (conflagration excepted).
- 168. Absorption of deleterious gases (conflagration excepted).
- 169. Accidental drowning.
- 170. Traumatism by firearms.
- 171. Traumatism by cutting or piercing instruments.
- 172. Traumatism by fall.
- 173. Traumatism in mines and quarries.
- 174. Traumatism by machines.
- 175. Traumatism by other crushing (vehicles, railways, landslides, etc.).
- 176. Injuries by animals.
- 177. Starvation.
- 178. Excessive cold.
- 179. Effects of heat.
- 180. Lightning.
- 181. Electricity (lightning excepted).
- 182. Homicide by firearms.
- 183. Homicide by cutting or piercing instruments.
- 184. Homicide by other means.
- 185. Fractures (cause not specified).
- 186. Other external violence.

XIV.—ILL-DEFINED DISEASES.

- 187. Ill-defined organic disease.
- 188. Sudden death.
- 189. Cause of death not specified or ill defined.

In the conclusions which follow relating to each title of the International List, it is understood that all terms at present included under each title, except those approved as acceptable inclusions,

should be eliminated because they are either inadequate statements of cause of death, or are indefinite or obsolete terms.

CONCLUSIONS.

1. Typhoid Fever.

1. *Typhoid fever* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Enteric fever, typhoid fever, typhus abdominalis*.

3. *Paratyphoid fever* should be transferred to title No. 19 (*Other epidemic diseases*).

2. Typhus Fever.

1. *Typhus fever* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Typhus exanthematicus, typhus fever*.

3. *Tabardillo* should be transferred to this title from title No. 19 (*Other epidemic diseases*).

4. It is recommended that the term "Brill's disease" be included in a list (which the committee will recommend be sent out by the Bureau of the Census) made up of terms that are no longer acceptable.

3. Relapsing Fever.

1. The title heading should be changed to *Relapsing (Spirillum obermeieri) fever*, and this statement is an acceptable one without autopsy only when the statement of the cause of death is accompanied or supported by a record of the finding of the etiological factor, that is, the *spirillum obermeieri* before death.

2. Of the terms now included under this title heading the following only are approved as acceptable: *Recurrent fever, relapsing (spirillum) fever*.

3. It is the opinion of the committee that a new title in the International List should be created under the caption of *Malta fever* (a form of relapsing fever due to the *micrococcus melitensis*) and that under this new title should be included the terms *febris melitensis, Malta fever*, and *Mediterranean fever*.

4. Malaria.

1. *Malaria* is not an acceptable statement of cause of death without the supporting statement that the etiological factor, the *plasmodium malarix*, was found in the blood before death.

2. Of the terms now included under this title heading the following only are approved as acceptable: *Estivoautumnal fever, black-*

water fever, malarial hemoglobinuria, malignant tertian malaria, quartan malaria, tertian malaria.

3. The following term should be added to the list of inclusions: *Paludism*.

5. Smallpox.

1. *Smallpox* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable: *Hemorrhagic smallpox, malignant smallpox, smallpox, variola*.

6. Measles.

1. *Measles* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Hemorrhagic measles, measles, morbilli*.

3. The term *rubeola* should be used *only* as a synonym of *German measles*.

7. Scarlet Fever.

1. *Scarlet fever* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Nephritis following scarlet fever, scarlatina, scarlatina angiosa, scarlatina maligna, scarlatinal* (any disease or condition so qualified), *scarlet fever*.

8. Whooping Cough.

1. *Whooping cough* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Pertussis, whooping cough*.

9. Diphtheria and Croup.

1. It is recommended that the title be changed to *Diphtheria* and that this be regarded as an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following *only* are approved as acceptable inclusions: *Buccal diphtheria, cutaneous diphtheria, diphtheria of bronchi, diphtheria of conjunctiva, diphtheria of fauces, diphtheria of larynx, diphtheria of mouth, diphtheria of nose, diphtheria of esophagus, diphtheria of palate, diphtheria of pharynx, diphtheria of skin, diphtheria of tonsil, diphtheria of trachea, diphtheria of vulva, diphtheria of wound, gangrenous diphtheria, nasal diphtheria, postdiphtheritic nephritis*.

The terms *diphtheritic neuritis*, *diphtheritic paralysis* and *postdiphtheritic neuritis* should be accepted only when the muscles involved are specified. When possible, the specific site of the lesion should be stated.

10. Influenza.

1. It is the recommendation of the committee that *Influenza* be considered unacceptable as a statement of cause of death unless confirmed by autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Bronchial influenza*, *bronchitis due to grip*, *bronchopneumonia due to grip*, *grip*, *influenza*, *influenza followed by pneumonia*, *influenzal pneumonia*, *la grippe*, *pneumonia due to grip*.

11. Miliary Fever.

1. It is the recommendation of the committee that *miliary fever* be considered unacceptable as a statement of cause of death without autopsy; that the title be abolished and that the terms now listed under it be transferred to the list of unacceptable terms under title No. 19 now under the tentative subtitle 19B.

12. Asiatic Cholera.

1. *Asiatic cholera* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Asiatic cholera*, *cholera* (where Asiatic cholera is prevalent), *epidemic cholera* (where Asiatic cholera is prevalent).

13. Cholera Nostras.

1. The committee recommends that the title *Cholera nostras* be omitted from the International Classification on the ground that it is merely a symptom of a severe gastrointestinal irritation, from whatever cause, and that reports under this title, if encountered on death certificates, be included under titles 104 and 105, according to age of decedent. The committee, however, is of the opinion that these terms are all indefinite or obsolete and they are not regarded therefore as acceptable inclusions under any title heading.

14. Dysentery.

1. *Dysentery* is not an acceptable statement of cause of death unless the specific cause of infection has been identified.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Amebic dysentery*, *bacillary dysentery*, *balantidic dysentery*, *Cochin-China dysentery*, *dysentery*, *entamebic dysentery*.

3. The committee recommends that the following terms be added to the list of acceptable inclusions: *Schistosomiasis*, *schistoma dysentery*.

4. The committee recommends the transfer to this title of the term *tropical abscess of the liver* from title No. 115 (*Other diseases of the liver*).

15. Plague.

1. *Plague* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Bubonic plague*, *pest*, *plague*, *plague* (pulmonary form), *plague* (septicemic form), *pneumonic plague*.

16. Yellow Fever.

1. *Yellow fever* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Febris flava*, *yellow fever*.

17. Leprosy.

1. *Leprosy* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Anesthetic leprosy*, *leprosy*, *nodular leprosy*, *tubercular leprosy*. The location of the lesion should be stated and all specifications of such location should, of course, be regarded (in addition to those noted above) as acceptable inclusions.

18. Erysipelas.

1. This is an acceptable statement of cause of death without autopsy, inasmuch as autopsy is not necessary to verify the presence of *erysipelas*.

It is an unacceptable statement of cause of death if there is no qualifying statement, because the site and occasion of the infection should be given, particularly in cases of accident or injury.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Erysipelas after vaccination*, *erysipelas neonatorum*, *surgical erysipelas*, *erysipelas of* [any site].

3. The following term should be added to those noted above: *Erysipelas after operation*.

4. The note under title No. 18, in so far as it relates to excluded terms should read:

"This title does not include *puerperal erysipelas* (137)."

18A. Acute Poliomyelitis. (Tentative title.)

1. It is the opinion of the committee that a new title should be created (this may, for the present, be designated 18A), and that the caption should be *Acute poliomyelitis*. This should be considered an acceptable statement of cause of death, without autopsy, when the disease is appearing in epidemic form. It is the judgment of the committee that the term *epidemic infantile paralysis* may be considered an acceptable inclusion under this title.

2. The following terms should be transferred from present title No. 63 to this title: *Acute atrophic infantile paralysis, acute infantile paralysis, acute anterior poliomyelitis, acute poliomyelitis, epidemic poliomyelitis, acute ascending poliomyelitis, acute ascending anterior poliomyelitis, acute ascending spiral paralysis, acute polioencephalomyelitis, progressive ascending anterior poliomyelitis*.

18B. Epidemic Cerebrospinal Meningitis. (Tentative title.)

1. It is the opinion of the committee that a new title should be created (this may, for the present, be designated 18B), and that the caption should be *Epidemic cerebrospinal meningitis*. This should be considered an acceptable statement of cause of death, without autopsy, if the specific organism, namely, the *meningococcus*, has been recovered from the cerebrospinal fluid.

2. It is the sense of the committee that the terms *cerebrospinal fever, epidemic cerebrospinal meningitis*, and *meningococcic cerebrospinal meningitis* be transferred from present title No. 61, subtitle 3, to this title.

18C. Septic Sore Throat. (Tentative title.)

1. It is recommended that a new title be created (this may, for the present, be designated 18C) and that its caption be *Septic sore throat*. This is an acceptable cause of death, without autopsy.

2. It is the sense of the committee that the terms *septic sore throat* and *septic disease of throat* should be transferred from present title No. 100 to this title, and that the following terms should be listed under this title as acceptable inclusions: *Streptococcic sore throat, epidemic infectious tonsillitis, epidemic infectious pharyngitis*.

18D. Malta Fever. (Tentative title.)

1. It is the opinion of the committee that a new title in the International List should be created under the caption of *Malta fever* (a form of relapsing fever due to the *micrococcus melitensis*) and that under this new title should be included the terms *febris melitensis, Malta fever*, and *Mediterranean fever*. This is an acceptable cause of death, without autopsy, if there is an accompanying record of the finding of the etiological factor *micrococcus melitensis* before death.

19. Other Epidemic Diseases.

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its acceptableness or nonacceptableness without autopsy.

2. It is recommended that the caption of the title be changed to *Other infectious diseases* and that the title be placed after present title No. 38 (*Gonococcus infection*).

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Chicken pox*, *dengue*, *dengue fever*, *frambesia* (if etiological factor has been found), *filariasis* (if etiological organism has been found), *German measles*, *mumps*, *milk sickness*, *Pappataci fever*, *rötheln*, *rubella*, *Rocky Mountain spotted fever*, *tick bite fever*, *trembles* (*milk sickness*), *varicella*, *yaws* (if etiological factor has been found).

4. The committee recommends that the terms *phlebotomus fever*, *rat bite fever*, and *sandfly fever* be added to the list of inclusions.

5. The committee recommends the transfer of the following terms from other titles to this: *Paratyphoid fever* from title No. 1 (*Typhoid fever*); *miliary fever*, *sweating fever* from present title No. 11 (*Miliary fever*); *cowpox*, *vaccinia* from title No. 20 (*Purulent infection and septicemia*); *Vincent's angina* from title No. 100 (*Diseases of the pharynx*); *actinomycosis*, *aspergillosis*, *blastomycosis*, *madura foot*, *mycetoma*, *mycosis fungoides*, *sporotrichosis*, *streptomycosis* from present title No. 25 (*Mycoses*); *kala-azar* from title No. 54; (*Anemia*, *Chlorosis*); *sleeping sickness*, *trypanosomiasis* from present title No. 55 (*Other general diseases*); *psilosis* from title No. 110 (*Other diseases of the intestines*), *acute infectious jaundice*; *Weil's disease* from title No. 111 (*Acute yellow atrophy of the liver*). *Muguet* from title No. 99 (*Diseases of the mouth and annexa*).

6. The committee recommends the transfer of the following inclusions to other titles: *Mexican typhus*, *tabardillo* to title No. 2 (*Typhus fever*); *acute parotitis* [*parotiditis*] to title No. 99 (*Diseases of the mouth and annexa*); *glandular fever* to title No. 189 (*Cause of death not specified or ill-defined*).

7. The term *rubeola* should be used *only* as a synonym of German measles.

20. Purulent Infection and Septicemia.

1. The committee recommends that this be considered acceptable without autopsy if there is an accompanying statement of the site, nature, and means of injury and of the site of the original infection. The committee also recommends that where additional information justifies the assignment of a death in which *septicemia* was a factor to other titles (e. g., to No. 137, *Puerperal septicemia*, or to any of the

titles covering deaths due to external violence), it should be assigned according to standard practice.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *General sepsis, general septicemia, hospital gangrene, pyemia, pyogenic infection, sepsis, septicemia*.

3. The committee recommends the transfer of the following terms to this title:

From title No. 142, *cancrem oris, dermatitis gangrenosa, dry gangrene, gangrene (nontraumatic) (site of lesion must be specified), malignant edema, moist gangrene, noma of mouth, noma of vulva, phagedena of penis, phagedena of vulva*.

From title No. 143, *carbuncle (site must be specified), furunculosis, malignant carbuncle, multiple carbuncle*.

From title No. 144, all terms included under this title, it being the recommendation of the committee that where the location of a pus process is obviously insufficient to cause death, *per se*, without the presence of accompanying septicemia, such cases should be assigned to title No. 20.

4. *Cowpox and vaccinia* should be transferred to title No. 19 (*Other epidemic diseases*).

21. Glanders.

1. *Glanders* is not an acceptable statement of cause of death without autopsy unless there is an accompanying record of the finding of the etiological factor; i. e., the *bacillus mallei*.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Equinia, farcy, glanders*.

3. The following term should be added to the list of acceptable inclusions: *Infection by bacillus mallei*.

4. The reports should include a statement as to whether the infection was acquired in the course of occupation or industry.

22. Anthrax.

1. *Anthrax* is not an acceptable statement of cause of death without autopsy without determination of the etiological factor; i. e., the *bacillus anthracis*.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Anthrax, charbon, malignant pustule, woolsorters' disease*.

3. The following term should be added to the list of acceptable inclusions: *Infection by bacillus anthracis*.

4. The reports should include a statement as to whether the infection was acquired in the course of occupation or industry.

23. Rabies.

1. *Rabies* is not an acceptable statement of cause of death unless verified by autopsy or proof that bite was by a proved rabid animal.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Hydrophobia*, *rabies*.

3. The committee recommends that the term *lyssa* be added to the list of inclusions.

24. Tetanus.

1. The committee recommends that this be considered an acceptable statement of cause of death, without autopsy, when it is accompanied by information as to date, site, nature, and means of injury.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Lockjaw*, *tetanus*, *tetanus neonatorum*.

25. Mycoses.

1. The committee recommends that this title be eliminated and that the following inclusions be transferred to title No. 19, together with the additional term, *oidiomycosis*: *actinomycosis*, *aspergillosis*, *blastomycosis*, *madura foot*, *mycetoma*, *mycosis fungoides*, *sporotrichosis*, *streptomyces*.

26. Pellagra.

1. *Pellagra* is not an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only is approved as an acceptable inclusion: *Pellagra*.

27. Beriberi.

1. *Beriberi* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Beriberi*, *kakké*.

28. Tuberculosis of the Lungs.

1. *Tuberculosis of the lungs* is an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Chronic phthisis*, *chronic pneumonic phthisis*, *chronic pneumonic tuberculosis*, *chronic tuberculosis*, *chronic tuberculous pneumonia*, *congenital tuberculosis*, *fibroid phthisis*, *fibroid tuberculosis*, *laryngeal tuberculosis*, *phthisis*, *phthisis pulmonalis*, *pneumonic phthisis*, *pulmonary phthisis*, *pulmonary tuberculosis*, *tuberculosis of bronchi*, *tuberculosis of larynx*, *tuberculosis of lung*, *tuberculosis of pleura*, *tuberculosis of trachea*,

tuberculosis pulmonalis, tuberculous bronchitis, tuberculous bronchopneumonia, tuberculous empyema, tuberculous hemoptysis, tuberculous hydropneumothorax, tuberculous laryngitis, tuberculous phthisis, tuberculous pleurisy, tuberculous pneumonia, tuberculous pneumothorax.

29. Acute Miliary Tuberculosis.

1. This is not an acceptable statement of cause of death without autopsy unless tubercles have been found in some accessible part of the body (e. g., the retina) during life.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute general miliary tuberculosis, acute miliary tuberculosis, general miliary tuberculosis.*

30. Tuberculous Meningitis.

1. The committee recommends that the name of this title be changed to *Tuberculosis of brain and cerebrospinal meninges*, and that it be considered an acceptable statement of cause of death without autopsy for children under 10 years of age, but not for decedents of older groups, unless there is confirmatory bacteriological proof of the presence of tubercle bacillus in the spinal fluid.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Tuberculosis of brain, tuberculosis of cerebellum, tuberculosis of cerebral meninges, tuberculosis of cerebrospinal meninges, tuberculosis of cerebrum, tuberculosis of meninges, tuberculosis of spinal meninges, tuberculous encephalitis, tuberculous meningitis, tuberculous inflammation of brain.*

3. The following term should be added to the list of acceptable inclusions: *Solitary tubercle of brain.*

31. Abdominal Tuberculosis.

1. It is the recommendation of the committee that this be considered not acceptable without autopsy, unless proof of an abdominal operation or recovery of tubercle bacillus from the abdominal fluid is presented.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abdominal tuberculosis, intestinal tuberculosis, tabes mesenterica, tuberculosis of abdomen, tuberculosis of alimentary canal, tuberculosis of anus, tuberculosis of appendix, tuberculosis of intestine, tuberculosis of mesenteric gland, tuberculosis of omentum, tuberculosis of peritoneum, tuberculosis of rectum, tuberculosis of stomach, tuberculous appendicitis, tuberculous colitis, tuberculous enteritis, tuberculous ileocolitis, tuberculous peritonitis, tuberculous ulcer of bowel, tuberculous ulcer of intestine.*

3. The terms *tuberculosis of cecum* and *tuberculosis of retroperitoneal lymph nodes* should be added to the list of inclusions.

32. Pott's Disease.

1. It is the recommendation of the committee that the name of this title be changed to *Tuberculosis of the spinal column*, and that it be regarded as an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Caries of spine, caries of vertebrae, Pott's disease, psoas abscess, psoas and lumbar abscess, spinal caries, spinal tuberculosis, tuberculosis of spinal column, tuberculosis of spine, tuberculosis of vertebrae, tuberculous abscess of vertebrae, tuberculous caries of sacrum, tuberculous lumbar abscess.*

33. White Swellings.

1. The committee recommends that this title be discontinued and the terms now listed under it be placed among those to be included under a new title to be called (tentatively) *Tuberculosis of other organs and chronic generalized tuberculosis.*

34. Tuberculosis of Other Organs.

1. The committee recommends that this title, as now constituted, be discontinued, and that the terms now listed under it be included under a new title to be called (tentatively) *Tuberculosis of other organs and chronic generalized tuberculosis.*

2. The committee recommends that statements of cause of death listed under present title No. 34, which relate to organs or parts of the body which are accessible to direct vision, be considered acceptable without autopsy, and that in other cases they be considered unacceptable without autopsy.

35. Disseminated Tuberculosis.

1. The committee recommends that this title, as now constituted, be discontinued, and that the terms now listed under it be included under a new title to be called (tentatively) *Tuberculosis of other organs and chronic generalized tuberculosis.*

35A. Tuberculosis of Other Organs and Chronic Generalized Tuberculosis. (Name and number are tentative:)

1. The committee recommends that tuberculosis of organs not covered by titles 28 to 32 be assigned to this heading which should be subdivided into—

A. *Generalized tuberculosis.*

B. *Tuberculosis of the skin and subcutaneous tissues.*

C. *Tuberculosis of kidneys and genitourinary system.*

D. *Tuberculosis of bones and joints* (except tuberculosis of spinal column).

E. *Tuberculosis of organs of special sense.*

F. *Tuberculosis of lymphatic system* (except the mesenteric glands).

2. The committee further recommends that a note be added to the title to the effect that wherever possible the location, extent, and character of the tuberculous lesion should be specified.

3. The committee made no recommendations covering the matter of acceptable inclusions under this new tentative title, nor did it discuss the matter of whether or not it should be considered acceptable without autopsy, except as explained under No. 34, which see; also No. 33.

36. Rickets.

1. The committee does not consider *Rickets* an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading, the following only are approved as acceptable inclusions: *Rachitis, rickets.*

3. The committee recommends that the following inclusions be transferred to title No. 146 (*Diseases of the bones*): *Achondroplasia, hypertrophic osteoarthropathy, mollities ossium, osteomalacia, pulmonary osteoarthropathy.*

37. Syphilis.

1. It is the conclusion of the committee that *Syphilis* is not acceptable as a statement of cause of death without autopsy unless diagnosis was based on lesions superficially situated or visible through body orifices, or confirmed by unquestioned specific test; further, that where syphilis is given as a cause of death, a statement of the site, extent and character of the lesion should be given.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Congenital lues, congenital syphilis, gumma of brain, hereditary lues, hereditary syphilis, inherited syphilis, lues infantum, secondary syphilis, syphilis* (unqualified or of any organ or part of the body), *syphilitic* (any affection), *tertiary syphilis.*

3. The term *acquired syphilis* should be added to the list of inclusions.

4. The committee recommends the transfer of the term *hepatitis of newborn* from present title No. 151, subtitle 2 (*Congenital debility*) to this title.

38. Gonococcus Infection.

1. The committee considers this an unacceptable statement of cause of death without autopsy unless a gonococcic lesion has been demonstrated by the recovery of the gonococcus from the site of the lesion, or by specific serum reaction.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Gonococcic arthritis, gonococcic endocarditis, gonococcic infection, gonococcic ophthalmia, gonococcic peritonitis, gonococcus infection* (of any organ), *ophthalmia neonatorum*.

3. The following terms should be added to the list of inclusions: *Gonococcic salpingitis, gonococcic septicemia*.

Conclusions on Prefatory Note on Cancers and Other Malignant Tumors.

(Page 63 of the Manual of the International List of Causes of Death.)

1. The caption of this prefatory note should be changed to *Forms of tumors* and subdivided into (A) *Cancers and other malignant tumors* and (B) *Nonmalignant tumors*.

2. Under (A) the following terms should be retained as acceptable inclusions: *Adenocarcinoma, alveolar cancer, alveolar sarcoma, angiosarcoma, cancer, carcinoma, carcinoma myxomatodes, chondrosarcoma, colloid carcinoma, columnar-celled carcinoma, cystosarcoma, endothelioma, epithelioma, fibrosarcoma, giant-celled sarcoma, hemendothelioma, hypernephroma, lymphendothelioma, lymphosarcoma, malignant tumor, melanosarcoma, metastatic cancer, myeloid sarcoma, myxosarcoma, osteosarcoma, papilliferous carcinoma, plexiform sarcoma, sarcoma, scirrhus carcinoma*.

3. The committee recommends that the following terms be added to the above list: *Multiple myeloma, gliosarcoma, liposarcoma, myosarcoma, chorioepithelioma*.

4. All terms now included in the list of *Cancers and other malignant tumors*, on page 63 of the Manual of the International List of Causes of Death, except those noted above, should be eliminated because they are either indefinite or obsolete.

5. Under (B) *Nonmalignant tumors*, the following terms (now included under present title No. 46, on pp. 66-67 of the Manual) should be retained as acceptable inclusions: *Adenofibroma, adenoma, adenomyxoma, angioma, cavernous lymphangioma, cavernous nevus, chondroma, cystadenoma, cystic hygroma, cystic lymphangioma, cystoma, dermoid cyst, enchondroma, myoma, myxochondroma, myxofibroma, myxoma, fibroid, fibroid tumor, fibrolipoma, fibroma, fibroma molluscum, ganglionic neuroma, glioma, hemangioma, hematoma (nontraumatic), leiomyoma, lipoma, lymphangioma, lymphatic nevus, lymphoma, papilloma, rhabdomyoma, sebaceous cyst, sebaceous tumor, teratoma, tumor (nonmalignant or unqualified)*.

6. The committee recommends that the following terms be added to the above list: *Adenomyoma, cholesteatoma, chordoma, melanoma, neuroma, osteoma, odontoma, xanthoma*.

7. The committee recommends that the term *neurofibroma* be transferred to title No. 74 (*Other diseases of the nervous system*).

39. Cancer and Other Malignant Tumors of the Buccal Cavity.

1. The committee considers this title to be in the acceptable class without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Cancer and other malignant tumors of buccal cavity, cheek, gum, jaw, lip, maxilla, mouth, palate, salivary gland, soft palate, tongue, tonsil.*

40. Cancer and Other Malignant Tumors of the Stomach, Liver.

1. It is the opinion of the committee that reports of cause of death listed under this title are not acceptable without autopsy unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Cancer and other malignant tumors of bile duct, cardiac orifice of stomach, gall bladder, gall duct, liver, esophagus, pharynx, pylorus, stomach, and carcinoma ventriculi.*

41. Cancer and Other Malignant Tumors of the Peritoneum, Intestines, Rectum.

1. It is the opinion of the committee that reports of cause of death listed under this title are not acceptable without autopsy unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Cancer and other malignant tumors of anus, appendix, cecum, colon, duodenum, ileum, intestine, jejunum, mesentery, omentum, peritoneum, rectum, retroperitoneal gland, sigmoid flexure, and lymphosarcoma of peritoneum.*

3. The following terms, in the opinion of the committee, should be added to the above list of inclusions: *Cancer of mesenteric gland, cancer of retroperitoneal space.*

42. Cancer and Other Malignant Tumors of the Female Genital Organs.

1. It is the opinion of the committee that reports of cause of death listed under this title are not acceptable without autopsy unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved as acceptable synonyms: *Cancer and other malignant tumors of broad ligament, cervix, fallopian tube, ovary, uterine ligament, uterus, vagina, vulva, deciduoma malignum, and syncytioma.*

3. The committee recommends the transfer of the following terms now included under this title: *Chorioepithelioma* to list of malignant

tumors on page 63 of the Manual of the International List of Causes of Death; *hydatid mole* and *hydatidiform mole* to title No. 134 (*Accidents of pregnancy*).

43. Cancer and Other Malignant Tumors of the Breast.

1. It is the opinion of the committee that this title should be placed in the acceptable class without autopsy.

2. Of the terms now included under this title heading the following only are acceptable inclusions: *Cancer and other malignant tumors of the breast, mammary gland, nipple; cancer en cuirasse.*

3. The committee recommends the transfer to this title of the term Paget's disease of nipple from present title No. 133 (*Nonpuerperal diseases of the breast.*)

44. Cancer and Other Malignant Tumors of the Skin.

1. The committee recommends that the terms assignable to this title be regarded as acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable: *Cancer and other malignant tumors of auricle (of ear), chin, ear, face, head, nose, scalp, skin, umbilicus; epithelial tumor (location not indicated), epithelioma (location not indicated), rodent ulcer.*

45. Cancer and Other Malignant Tumors of Other Organs or of Organs Not Specified.

1. It is the opinion of the committee that reports of cause of death listed under this title are not acceptable without autopsy unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *General carcinomatosis, general sarcomatosis, miliary carcinosis, multiple cancer* (accept, but query for type), *sarcomatosis* (unqualified); also *cancers of organs or parts of the body not included in titles 39 to 44*, if the seat of the cancer is definitely described in the statement of cause of death.

46. Other Tumors (Tumors of the Female Genital Organs Excepted).

1. The committee recommends that the name of this title be changed to *Benign tumors* (site ill-defined or not stated), that it be considered in the unacceptable class without autopsy, and that to the footnote in the manual beginning with "This title does not include" be added *tumors of the female genital organs.*

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Tumor, with location not stated; tumor of abdomen, axilla, blood vessel, chest, connective tissue, gland, hip, mediastinal gland, mediastinum, muscle, neck, thorax.*

3. The inclusions under "Forms of tumor," pages 66 to 67 of the Manual of the International List of Causes of Death, so far as approved, are referred to the new prefatory note on nonmalignant tumors recommended in this report.

4. The committee recommends the transfer of *neurofibroma* to title No. 74 (*Other diseases of the nervous system*).

47. Acute Articular Rheumatism.

1. The committee recommends that the name of this title be changed to *Acute rheumatic fever* and that it be considered an acceptable statement of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute articular rheumatism*, *acute rheumatic arthritis*, *acute rheumatic fever*, *rheumatic arthritis*, *rheumatic carditis*,¹ *rheumatic endocarditis*,¹ *rheumatic fever*, *rheumatic myocarditis*,¹ *rheumatic pancarditis*,¹ *rheumatic pericarditis*, *rheumatic pleurisy*.

3. The committee recommends the transfer of *Schönlein's disease* to title No. 55 (*Other general diseases*).

48. Chronic Rheumatism and Gout.

1. It is the recommendation of the committee that this title be changed to *Chronic arthritis and gout* and subdivided into (A) *Chronic arthritis* and (B) *Gout*. Each is unacceptable without autopsy.

2. The following terms are approved as acceptable inclusions for 48A: *Arthritis deformans*, *chronic articular rheumatism*, *chronic inflammatory rheumatism*, *chronic rheumatic arthritis*, *chronic rheumatism*, *chronic rheumatoid arthritis*, *Heberden's disease*, *osteoarthritis*, *rheumatoid arthritis*, *spondylitis deformans*.

3. The following terms are approved as acceptable inclusions for 48B: *Gout*, *gout of joint*, *gouty iritis*, *gouty synovitis*, *Heberden's nodes*, *podagra*.

49. Scurvy.

1. The committee considers this title in the acceptable class without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Barlow's disease*, *infantile scurvy*, *scorbutus*, *scurvy*.

3. The committee recommends that Werlhof's disease be transferred to title No. 55 (*Other general diseases*).

¹ The cardiac lesions due to acute rheumatic inflammation and not the chronic sequelae are referred to by these inclusions.

50. Diabetes.

1. The committee recommends that this title be considered a cause of death that is acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acidosis* (diabetic), *diabetes*, *diabetes mellitus*, *diabetic coma*, *diabetic gangrene*.

51. Exophthalmic Goiter.

1. The committee recommends that this title be discontinued (see new tentative title to follow).

51A. Diseases of the Thyroid Body. (Tentative title.)

1. The committee recommends that this title be transferred to Class I (*General diseases*) from its present place under Class IV.

2. It further recommends that it be subdivided into (A) *Hyperthyreoses* and (B) *Hypothyreoses*.

3. Statements of causes of death under subtitle 51A are acceptable without autopsy; those under subtitle B are unacceptable without autopsy.

4. Subtitle (A) *Hyperthyreoses* should have the following list of inclusions: *Exophthalmic goiter*, *Basedow's disease*, *Grave's diseases*, *Parry's disease*.

5. Subtitle (B) *Hypothyreoses* should have the following list of inclusions: *Adenoma of thyroid gland*, *atrophy of thyroid gland*, *colloid goiter*, *cystic goiter*, *cretinism*, *cretinoid degeneration*, *endemic cretinism*, *endemic deaf-mutism*, *enlargement of thyroid*, *hypothyroidism*, *myxedema*, *pachydermic cachexia*, *sporadic cretinism*.

51B. Diseases of the Thymus Gland. (Tentative title.)

1. The committee recommends that a new title be created with the above caption; that it be given a place among the titles under the class of *General diseases*. The statements of cause of death under this title should be considered unacceptable without autopsy.

2. It further recommends that the following terms be transferred from present title No. 84 (*Diseases of the lymphatic system*): *Atrophy of thymus*, *lymphatism*, *status lymphaticus*, *status thymicolymphaticus*, *thymic asthma*, *status thymicus*, *enlargement of thymus gland*, *persistent thymus gland*.

51C. Diseases of the Parathyroid. (Tentative title.)

1. The committee recommends that a new title be created with the above caption; that it be given a place among the titles under the class of *General diseases*. The statement of cause of death under this title should be considered acceptable without autopsy.

2. It further recommends that under this title be included the term *tetany*.

Specify if following operative procedure.

52. Addison's Disease.

1. The committee considers this title in the class that is acceptable without autopsy.

2. Of the terms now included under this title heading the following only is approved as an acceptable inclusion: *Addison's disease*.

52A. Diseases of Pituitary Body. (Tentative title.)

1. The committee recommends that a new title be created with the above caption; that it be given a place among the titles under the class of *General diseases*. The statements of cause of death under this title should be considered unacceptable without autopsy.

2. It further recommends that the following terms be listed as inclusions: *Acromegaly*, *dyspituitarism*, *gigantism*, *hyperpituitarism*, *hypopituitarism*, *tumor of pituitary body*.

52B. Diseases of the Spleen.

1. This title is placed here tentatively pending action on the committee's recommendation that it be transferred to this class from Class V (*Diseases of the digestive system*). See recommendation under present title No. 116. This statement of cause of death is considered unacceptable without autopsy or operation.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Enlargement of spleen* (nonmalarial), *megalosplenía* (nonmalarial), *tumor of spleen* (nonmalignant).

3. The committee recommends the addition of the term *splenomegaly* (nonmalarial).

4. The committee recommends the transfer of the term *hydatid cyst of spleen* to title 107, the new tentative title of which is *Other intestinal parasites*.

53. Leukemia.

1. It is the opinion of the committee that the statement of *leukemia* as a cause of death should not be considered acceptable unless verified by confirmatory blood examination.

2. Of the terms now included under this title heading the following only is approved as an acceptable inclusion: *Leukemia*.

3. The committee recommends that the following terms be added to the list of inclusions: *Acute lymphocytic leukemia*, *chronic lymphocytic leukemia*, *acute myelocytic leukemia*, *chronic myelocytic leukemia*, *lymphochloroma*, *myelochloroma*.

4. The committee recommends that *Hodgkin's disease* with its synonyms be accorded a separate title in the International List (see next title).

53A. Hodgkin's Disease. (Tentative title.)

1. The title is accorded this position tentatively (see recommendation under title No. 53). This title is unacceptable without autopsy, unless accompanied by a record of microscopic proof of the character of the lesion, as shown by specimens removed from the tumor or tumors during life.

2. The committee recommends that the following terms be listed as inclusions under this title heading: *Lymphadenia, lymphadenoma, lymphadenoma of lymphatic glands, lymphadenoma of spleen, lymphadenosis, malignant lymphadenoma, multiple lymphadenoma.*

54. Anemia, Chlorosis.

1. It is of the opinion of the committee, that statements of death from anemia or chlorosis should not be considered acceptable without autopsy unless supported by confirmatory blood examination.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Anemia, chlorosis, pernicious anemia, progressive anemia, splenic anemia.*

3. In the opinion of the committee, the term *progressive pernicious anemia* should be added to the list of inclusions.

4. It is the opinion of the committee, that the following terms now included under this title should be transferred: *Banti's disease* and *Griesinger's disease* to title No. 116 (*Diseases of the spleen*).

55. Other General Diseases.

1. As this is the residual title of Class I it should be placed after present title No. 59, and become the last title in the class.

2. The title includes so many and such unrelated conditions that no recommendation is made as to its acceptableness or nonacceptableness without autopsy.

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acidosis* (nondiabetic), *adiposis dolorosa, diabetes insipidus, hemochromatosis, hemophilia, hemophilia neonatorum, Henoch's purpura, ochronosis, purpura, purpura rheumatica, sulphemoglobinemia.*

4. The committee recommends the following transfers of included terms: *Acromegaly* to new tentative title No. 52A *Diseases of the pituitary body*; *chronic polycythemia* to title No. 116 (*Diseases of the spleen*); *methemoglobinemia* to title No. 168 (*Absorption of deleterious gases—Conflagration excepted*); *sleeping sickness* and *trypanosomiasis* to title No. 19 (*Other epidemic diseases*).

5. The committee has recommended the transfer to this title of *Schönlein's disease* from title No. 47 (*Acute articular rheumatism*), of *Werlhof's disease* from title No. 49 (*Scurvy*), of *amyloid degeneration of liver*, *amyloid liver*, *lardaceous degeneration of liver*, *lardaceous liver*, *large waxy liver*, *waxy degeneration of liver*, *waxy liver* from title No. 113 (*Cirrhosis of the liver*), *amyloid degeneration of kidney*, *lardaceous degeneration of kidney*, *waxy degeneration of kidney* from title No. 120 (*Bright's disease*).

56. Alcoholism (Acute or Chronic).

1. The committee recommends that this title be divided into the following subtitles: (A) *Acute ethylism*, (B) *Delirium tremens*, (C) *Chronic alcoholism*. Of these (A) and (B) are acceptable without autopsy; (C) is acceptable if complicating lesions, sufficient to cause death, are specified.

2. The committee approved the following inclusions as acceptable terms: *Alcohol poisoning*, *alcoholic delirium*, *delirium tremens*, *dipsomania*, *ethylism*, *mania a potu*, *temulentia*.

3. The committee suggests the addition to the list of inclusions of the terms *acute alcoholism* and *chronic alcoholism*.

4. It is the recommendation of the committee that the terms *alcoholic neuritis* and *alcoholic polyneuritis* be transferred to this title from present title No. 73 (*Neuralgia and neuritis*).

57. Chronic Lead Poisoning.

1. The committee recommends that chronic lead poisoning be regarded as acceptable, without autopsy, if there appears a statement of an occupation in which decedent would be subject to lead poisoning, or if the source of the poisoning is specified and complications accompanying, sufficient to cause death, are described.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Chronic lead poisoning*, *colica pictonum*, *lead cachexia*, *lead colic*, *lead encephalitis*, *lead encephalopathy*, *lead paralysis*, *lead poisoning* (not acute), *morbus pictorum*, *painters' colic*, *plumbism*, *saturnism*.

3. The committee recommends the addition of the following terms to the list of inclusions: *Lead gout*, *lead nephritis*.

58. Other Chronic Occupation Poisonings.

1. It is recommended that titles 58 and 59 be merged under the caption *Other chronic poisonings* with two subdivisions, viz, (A) *Chronic occupation poisonings* and (B) *Other chronic poisonings*. The committee considers subtitle (A) acceptable without autopsy only in cases where the occupation or source of poison is specified and indicates that the poison was absorbed as a result of occupation;

or the characteristic lesions are superficially located or accessible to direct inspection; or there is chemical or microscopic proof of the presence of poison within the body. The committee considers subtitle (B) acceptable without autopsy only when the source of the poison is specified or there is chemical or microscopic proof of the presence of the poison within the body.

2. The committee did not formally approve as acceptable inclusions any of the terms which now appear under titles 58 and 59; the great majority of those now listed in the Manual of the International List of Causes of Death are acceptable.

59. Other Chronic Poisonings.

1. See conclusions under title No. 58.

60. Encephalitis.

1. The committee recommends that this title be abolished and that the terms now included, as well as those added and transferred to it, be assigned to title No. 74 (*Other diseases of the nervous system*).

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of brain*, *abscess of cerebellum*, *abscess of pons Varolii*, *encephalitis*, *inflammation of brain*.

3. The committee recommends the addition of the following terms: *Influenzal encephalitis* (Wickman), *polioencephalitis superior* (Wernicke).

4. The transfer of the terms *traumatic encephalitis* and *traumatic inflammation of brain* to title No. 186 (*Other external violence*) is recommended.

5. The committee recommends the transfer of *polioencephalitis* from title No. 63 (*Other diseases of the spinal cord*) to this title.

61. Simple Meningitis.

1. It is recommended that the name of this title be changed to *Acute infectious meningitis* and as such be acceptable without autopsy only when the infecting organism is declared, or with autopsy, and that where the death is the result of a trauma or a lesion elsewhere that it be referred to its appropriate heading according to standard practice.

2. It is recommended that the present subtitle 3 (*Cerebrospinal fever*) be transferred to Class I, under the title *Epidemic cerebrospinal meningitis*. (See tentative title 18B.)

3. Of the terms now included under present subtitle 1 (*Simple meningitis*) the following only are approved as acceptable inclusions: *Cerebral meningitis*, *cerebral pachymeningitis*, *Cervical pachymeningitis*,

chronic cerebrospinal meningitis, infectious meningitis,¹ internal pachymeningitis, pachymeningitis, pneumococcic meningitis, purulent meningitis, suppurative meningitis.

4. The committee recommends the addition of the following terms to subtitle 1: *Pachymeningitis externa, pachymeningitis interna hemorrhagica, pachymeningitis externa suppurativa, pachymeningitis interna suppurativa, leptomeningitis suppurativa, influenzal meningitis, suppurativa cerebrospinal meningitis, pneumococcic cerebrospinal meningitis, streptococcic cerebrospinal meningitis.*

5. Of the terms now included under present subtitle 2 (*Cerebrospinal meningitis*—undefined) the following only are approved as acceptable inclusions: *Acute cerebrospinal meningitis, cerebrospinal meningitis.*

6. The note in the Manual of the International List of Causes of Death under title No. 61 should be changed by adding *epidemic cerebrospinal meningitis* and *syphilitic meningitis.*

62. Locomotor Ataxia.

1. The committee recommends that *Locomotor ataxia* be considered acceptable only when accompanied by a statement of the contributing and determining cause of death.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Locomotor ataxia, tabes dorsalis.*

3. The committee recommends the transfer of the term *Duchenne's disease* to title No. 63 (*Other diseases of the spinal cord*).

63. Other Diseases of the Spinal Cord.²

1. The committee recommends that this title with all its inclusions be placed in the unacceptable class except with autopsy.

2. It is recommended that a new title be created, *Acute poliomyelitis.* (See tentative title No. 18A.)

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute ascending myelitis, acute myelitis, amyotrophic lateral sclerosis, amyotrophic paralysis, combined sclerosis of spinal cord, disseminated cerebrospinal sclerosis, disseminated myelitis, disseminated sclerosis, disseminated sclerosis of spinal cord, Erb's disease, Friedreich's ataxia, Friedreich's disease, Brown-Séquard's paralysis, bulbar paralysis, Charcot's disease, chronic myelitis, myelitis, myelitis from pressure, myelitis of spinal cord, new growth of membrane of spinal cord (nonmalignant), new growth of spinal cord (nonmalignant), paralysis agitans, Parkinson's disease,*

¹ If *infectious meningitis* is used as a synonym of *acute infectious meningitis* the infectious organism must be indicated.

² Exclusive of acute poliomyelitis (epidemic infantile paralysis).

primary lateral sclerosis, progressive bulbar paralysis, progressive multiple paralysis, progressive muscular atrophy, progressive muscular dystrophy, hematomyelia, hematomyelitis, hematorrhachis, hemorrhage of spinal cord, hemorrhage of spinal membrane, hereditary ataxia, hereditary spastic paraplegia, labioglossolaryngeal paralysis, labioglossopharyngeal paralysis, Landry's disease, Landry's paralysis, lateral sclerosis, Morvan's disease, multiple sclerosis, syringomyelia, transverse myelitis, pseudohypertrophic paralysis, spastic paralysis of spinal cord, spastic spinal paralysis, trembling paralysis, tumor of spinal cord, tumor of spinal meninges.

4. The committee recommends the addition of the following terms: *Hereditary spinal ataxia, Friedreich's or combined systemic disease, progressive spinal amyotrophy, Brown-Séquard's syndrome.*

5. The committee recommends the transfer to this title of Duchenne's disease from title No. 62 (*Locomotor ataxia*); paraplegia from title No. 66 (*Paralysis without specified cause*).

6. The committee recommends the transfer of the following terms now included to other titles: *Acute anterior poliomyelitis, acute atrophic spinal paralysis, acute infantile paralysis, acute ascending poliomyelitis, acute ascending anterior poliomyelitis, acute ascending spinal paralysis, acute polioencephalomyelitis, progressive ascending anterior poliomyelitis, anterior poliomyelitis* to new tentative title 18A; *myasthenia gravis* to title No. 74 (*Other diseases of the nervous system*).

64. Cerebral Hemorrhage, Apoplexy.

1. It is recommended that the name of this title be changed to *Apoplexy* and that it include terms indicating the various anatomicopathological processes that bring about the apoplectic death; if the contributing preexisting conditions or lesions are stated, statistical assignment according to standard practice is recommended; also that the title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Apoplectic stroke, apoplexy,¹ apoplexy of brain, apoplexy of meninges, cerebral apoplexy, cerebral hemorrhage¹ (1m+), epidural hemorrhage, hematoma of dura mater, hematoma of meninges, hemorrhage of brain¹ (1m+), hemorrhage of cerebellum, hemorrhage of cerebrum, hemorrhage of medulla, hemorrhage of meninges, hemorrhage of pons, intracranial hemorrhage, paralytic shock, paralytic stroke, pontine hemorrhage, ventricular hemorrhage.*

3. The committee recommends the following transfers of included terms: *Alcoholic edema of brain, alcoholic wet brain* to title No. 56 (*Alcoholism, acute or chronic*); *bulbar apoplexy, bulbar hemorrhage* to

¹ Deaths of infants under 1 month of age are assigned to title No. 182, subtitle 1 (*Injuries at birth*).

title No. 74 (*Other diseases of the nervous system*); *hemorrhagic pachymeningitis* to title No. 61, the present caption of which is *Simple meningitis*.

65. Softening of the Brain.

1. It is recommended that this title be eliminated as a main title and that the terms now classified under it be transferred to title No. 74 (*Other diseases of the nervous system*.)

2. Of the terms now included under this title heading the following only are approved as acceptable synonyms: *Cerebral softening*, *encephalomalacia*, *softening of brain*. These should be queried when received by registration offices or by the Bureau of the Census to determine whether they were not actually cases of general paresis of the insane, in which event they should be listed under title No. 67 (*General paralysis of the insane*); inquiry should also be made to determine if the condition was due to *arteriosclerosis*, *embolism*, *thrombosis*, *alcoholism*, *traumatism*, or any other discernible cause.

66. Paralysis Without Specified Cause.

1. It is recommended that title No. 66 be eliminated and that all its inclusions be transferred to title No. 74 (*Other diseases of the nervous system*), except those noted below for transfer to other titles.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Congenital hemiplegia*, *hemiplegia*.

3. The committee recommends the transfer of *paraplegia* to title No. 63 (*Other diseases of the spinal cord*) and that of *cerebral hemiplegia* and *hemiplegia of brain* to title No. 64 (*Cerebral hemorrhage, apoplexy*).

4. The committee recommends that reports of *paraplegia* be queried unless specified as of spinal origin.

5. It is recommended that *hereditary hemiplegia* be added to the list of acceptable inclusions to be transferred to title No. 74.

67. General Paralysis of the Insane.

1. This is in the acceptable class without autopsy, provided it is accompanied by a statement of the contributing and determining cause.

2. Of the terms now included under this title heading the following only are approved as acceptable: *Bayles's disease*, *dementia paralytica*, *general paralysis* (insane or reported from asylum), *general paresis*, *general tabetic paralysis*, *generalized paralysis* (insane), *paralysis of insane*, *paretic dementia*, *progressive general paralysis*.

3. The committee recommends the addition of the term *chronic diffuse meningoencephalitis*.

68. Other Forms of Mental Alienation.

1. This is in the unacceptable class without autopsy.
2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Circular insanity, dementia, dementia praecox, exhaustive psychosis, infective psychosis, Korssakoff's disease, Korssakoff's syndrome, manic depressive psychosis, paranoia, primary dementia, terminal dementia, toxic psychosis, traumatic psychosis.*

69. Epilepsy.

1. *Epilepsy* is an unacceptable statement of cause of death without autopsy unless death occurred in an epileptic attack and was witnessed, and there was a previous history of epilepsy.
2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Epilepsy, epileptic convulsions, epileptic dementia, epileptic psychosis, grand mal, status epilepticus.*
3. The committee recommends that the term *idiopathic epilepsy* be added to the list of inclusions.

70. Convulsions (Nonpuerperal).

71. Convulsions of Infants.

1. The committee recommends that these titles and included terms be transferred to title No. 189 (*Cause of death not specified or ill-defined*).
2. The following inclusions are approved for this transfer: *Convulsions, infantile convulsions, spasms.*

72. Chorea.

1. *Chorea* is an acceptable statement of cause of death without autopsy.
2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Chorea, chorea insaniens, chorea major, rheumatic chorea, Sydenham's chorea.*
3. The committee recommends that *electric chorea* be added to the list of inclusions.

73. Neuralgia and Neuritis.

1. It is recommended that the term *Neuralgia* be omitted from the title and be included under title No. 189 (*Cause of death not specified or ill-defined*) and that *Neuritis* be considered an acceptable statement of cause of death without autopsy, preferably with statement of the nerve or nerves involved and of the etiological factor.
2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *General neuritis, multiple neuritis, neuritis (of any nerve), peripheral neuritis, polyneuritis.*

3. The committee recommends the transfer of *alcoholic neuritis* and *alcoholic polyneuritis* to title No. 56 (*Alcoholism, acute and chronic*).

4. The committee recommends that the term *infectious neuritis* be added to the list of inclusions.

5. It is further recommended that registration offices and the Bureau of the Census query returns of *neuritis* and its synonyms to determine the nerve or nerves involved and the etiological factor.

74. Other Diseases of the Nervous System.

1. As this is the residual title of Class II, its position in the International List of Causes of Death should be changed; it should be the last title in the class and should follow present title No. 76 (*Diseases of the ears*).

2. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its acceptableness or nonacceptableness without autopsy.

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute hydrocephalus*,¹ *acquired hydrocephalus*,¹ *cerebella tumor*,² *cerebral cyst*,² *cerebral diplegia of children*, *cerebral glioma*,² *cerebral tumor*,² *chronic progressive chorea* (Huntington's chorea), *cyst of brain*,² *cyst of cerebellum*,² *cyst of membrane of brain*,² *cystic tumor of brain*,² *diffuse cerebral sclerosis*, *glioma of brain*,² *glioma of cerebellum*,² *hereditary chorea*, *Huntington's chorea*, *Huntington's disease*, *infantile cerebral diplegia*, *infantile cerebral paralysis*, *infantile imbecility*, *infantile spastic paralysis*, *internal hydrocephalus*,³ *intracranial tumor*,⁴ *Jacksonian epilepsy*, *Little's disease*, *meningeal tumor*,² *new growth of brain* (nonmalignant),² *new growth of membrane of brain* (nonmalignant),² *paramyoclonus multiplex*, *polioencephalitis inferior*, *polioencephalitis superior*, *psammoma*, *symptomatic epilepsy*, *traumatic epilepsy*, *tumor of brain*,² *tumor of corpora quadrigemina*,² *tumor of meninges*,² *tumor of meninges of brain*,² *tumor of motor tract*,² *tumor of nerve*, *tumor of pons Varolii*.²

4. The committee recommends the addition to the list of inclusions of the following terms: *Lobular cerebral sclerosis*, *von Recklinghausen's disease*.

5. The committee recommends the transfer to this title of the following: All inclusions of present titles No. 60 (*Encephalitis*); No. 65 (*Softening of the brain*); No. 66 (*Paralysis without specified cause*); No. 75 (*Diseases of the eyes and their annexa*) *myasthenia gravis* from title No. 63 (*Other diseases of the spinal cord*); *bulbar apoplexy* and

¹ This is a satisfactory return if the etiological factor is ascertainable.

² This return is satisfactory only when the cyst or tumor is seen from accessible cavities or through operation.

³ Acceptable without autopsy only after inquiry for etiology.

⁴ Acceptable without autopsy.

bulbar hemorrhage from title No. 64 (*Cerebral hemorrhage, apoplexy*); *neurofibroma* from title No. 46 (*Other tumors*), *myotonia congenita* and *Thomsen's disease* from present title No. 149 (*Other diseases of the organs of locomotion*); *chronic hydrocephalus, congenital cerebral tumor, congenital hydrocephalus, congenital tumor of brain, megalcephalus*, from subtitle 1 of present title No. 150 (*Congenital malformations*).

6. The committee recommends the transfer of the following inclusions to other titles: *Cretinism* to new tentative title No. 51A (*Diseases of the thyroid body*); *cysticercus of brain* and *hydatid of brain* to title No. 107 (*Intestinal parasites*); *paralysis of diaphragm, paralysis of phrenic nerve, paralysis of pneumogastric nerve* to title No. 73 (now *Neuralgia and neuritis*, but the committee has recommended that it be changed to *neuritis*); *tetany* to new tentative title 51C (*Diseases of the parathyroid*); tumor of *pituitary body* to new tentative title No. 52A (*Diseases of the pituitary body*); *caisson disease, bends, divers' palsy, divers' paralysis* to a new title to be known as *Caisson disease* and which, for the present, may be designated 74A.

74a. Caisson Disease. (Tentative title.)

1. The committee recommends that a new title be created under the above caption and that under it be included the following terms now listed under title No. 74 (*Other diseases of the nervous system*): *Bends, Caisson disease, divers' palsy, divers' paralysis*.

2. The committee recommends the inclusion of this title in the acceptable class, without autopsy, if the character of the work during which the disease was acquired is specified.

75. Diseases of the Eyes and Their Annexa.

1. The committee recommends that this title be abolished, and that deaths reported as due to any of the conditions now included be compiled under title No. 74 (*Other diseases of the nervous system*).

2. It is the opinion of the committee, however, that *glaucoma* is the only term now listed under this title heading that need be transferred, as none of the others is likely to cause death.

76. Diseases of the Ears.

1. The conditions covered by this title are, when reported in definite terms, acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Caries of middle ear, labyrinthine suppuration, labyrinthine vertigo, otitis media, purulent otitis media, suppurative otitis media*.

3. The committee recommends that the following terms be added to the list of inclusions: *Acute suppurative mastoiditis, chronic suppu-*

rative mastoiditis, acute suppurative otitis media, chronic suppurative otitis media, otitic meningitis.

4. The committee recommends the transfer to this title of the following terms: *Abscess of mastoid process, disease of mastoid cells, empyema of mastoid process, mastoid abscess, mastoiditis, necrosis of mastoid*—all from title No. 146 (*Diseases of the bones—tuberculosis excepted*).

5. The footnote should contain a statement to the effect that where, on inquiry, either *tuberculosis* or *syphilis* is admitted as the etiological factor, the death should be compiled as due to *tuberculosis* or *syphilis*.

77. Pericarditis.

1. Pericarditis is an unacceptable report of cause of death without autopsy unless accompanied by a statement of primary cause or of the character of exudate obtained by paracentesis.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Adherent pericardium, adhesive pericarditis, effusion of pericardium, fibrinous pericarditis, hemopericardium* (inquiry should be made as to source of blood—traumatic? Aneurism?) *hydropericardium, hydropneumopericardium, mediastinopericarditis, pericarditis, pericarditis with effusion, pneumopericardium, purulent pericarditis, pyopericardium, pyopneumopericardium, suppurative pericarditis.*

78. Acute Endocarditis.

1. The committee recommends that the title heading be changed to *Acute infectious endocarditis and myocarditis*, and is of the opinion that it is an acceptable statement without autopsy.

2. The committee recommends that whenever the original site of the infection is specified the death be classified according to standard practice.

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute endocarditis, acute interstitial myocarditis, acute myocarditis, acute ulcerative endocarditis, congenital endocarditis, malignant endocarditis, mycotic endocarditis, septic endocarditis, ulcerative endocarditis, vegetative endocarditis.*

4. The committee recommends that the following terms be added to the list of inclusions: *Acute valvular endocarditis, acute infective endocarditis.*

79. Organic Diseases of the Heart.

1. It is the recommendation of the committee that the name of this title be changed to *Chronic diseases of the heart* and that it be subdivided into (A) *Affections of the myocardium* and (B) *Affections of the valves of the heart.*

2. The committee recommends that the title be put in the acceptable class without autopsy.

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions of the tentative subtitles:

Tentative subtitle (A): *Amyloid degeneration of heart, aneurism of heart, brown atrophy of heart, chronic interstitial myocarditis, chronic myocarditis, fatty degeneration of heart, fatty degeneration of myocardium, myocardial degeneration, myocardial insufficiency.*

Tentative subtitle (B): *Aneurism of valve of heart, aortic incompetency, aortic insufficiency, aortic obstruction, aortic regurgitation, aortic stenosis, aortic valvular disease of heart, cardiac mitral disease, chronic endocarditis, chronic mitral endocarditis, chronic rheumatic endocarditis, chronic ulcerative endocarditis, chronic valvular endocarditis, chronic valvular heart disease, incompetency of aortic valve, incompetency of mitral valve, incompetency of tricuspid valve, insufficiency of aortic valve, insufficiency of mitral valve, insufficiency of tricuspid valve, interstitial myocarditis, mitral incompetency, mitral insufficiency, mitral obstruction, mitral regurgitation, mitral stenosis, mitral valvular disease of heart, pulmonary insufficiency (ly+), pulmonary regurgitation, pulmonary stenosis, pulmonary valvular disease of heart, tricuspid incompetency, tricuspid insufficiency, tricuspid regurgitation, tricuspid valvular disease of heart, valvular cardiac disease, valvular disease of heart.*

4. The committee recommends that the following terms be added to the list of inclusions: *Chronic cardiac hypertrophy and dilatation* (A), *chronic degenerative myocarditis* (A), *fatty infiltration of heart* (A), *tricuspid stenosis* (B).

80. Angina Pectoris.

1. The committee recommends that this title be considered acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Angina of heart, angina pectoris, cardiac angina, stenocardia.*

81. Diseases of the Arteries, Atheroma, Aneurism, Etc.

1. The committee recommends that the name of this title be changed to *Diseases of the arteries* and that the title be subdivided into (A) *Aneurism* and (B) *Other diseases of the arteries*. *Aneurism* is not an acceptable statement without autopsy unless the anatomical location of the enlargement is specified. Subdivision B should be considered an acceptable statement of cause of death, without autopsy. This decision is made not because it is free from error, but because it would be impractical to exclude the title under present clinical conditions.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Aneurism of* (any specified site) *aortitis, arteriocapillary fibrosis, arteriofibrosis, arteriosclerosis, arteriosclerosis of brain, arteriovenous aneurism, arteritis, arteritis obliterans, atheroma, atheromatous degeneration of artery, cerebral arteriosclerosis, diffuse arteriosclerosis, endarteritis, endarteritis deformans, general arteriosclerosis, general atheroma.*

3. The committee recommends that the term *thromboangiitis obliterans* be added to the list of inclusions and that the qualifying word *nontraumatic* be inserted after the term *rupture of artery.*

4. The committee recommends the transfer of *Raynaud's disease* to this title from present title No. 142 (*Grangrene*).

82. Embolism and Thrombosis.

1. It is the recommendation of the committee that *Embolism* and *Thrombosis* be considered acceptable causes of death, without autopsy; and the committee also desires to emphasize the fact that it is desirable to specify the site of obstruction (name of vessel obstructed) and whether the obstruction was embolic or thrombotic, and, if embolic, the source of the embolus.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Basilar thrombosis, cerebral embolism, cerebral thrombosis, embolism of artery, embolism of coronary artery, embolism of mesenteric artery, embolism of pulmonary artery, obstruction of artery by clot, occlusion of artery by clot, pulmonary embolism, pulmonary thrombosis, thrombosis of artery, thrombosis of cerebral sinus, thrombosis of iliac artery, thrombosis of lateral sinus, thrombosis of portal vein, thrombosis of pulmonary artery, thrombosis of splenic vessel, thrombosis of uterine vein, thrombosis of vein.*

83. Diseases of the Veins (Varices, Hemorrhoids, Phlebitis, Etc.).

1. The committee recommends that this title be considered acceptable, without autopsy, if there is an accompanying statement of the site of the lesion or name of the vessel or vessels involved.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Aneurismal varix, endophlebitis, hemorrhoids, periphlebitis, phlebitis* (of a specified vein or sinus), *pylephlebitis, rupture of varicose vein, thrombophlebitis, varices* (location should be specified), *varicocele, varix of bladder, varix of esophagus, varix of pharynx, varix of vulva, venous angioma.*

84. Diseases of the Lymphatic System (Lymphangitis, Etc.).

1. This is an acceptable title without autopsy.

2. In giving *adenitis, lymphadenitis, or lymphangitis* as the cause of death the exact location of the glands or lymph vessels affected

should be stated together with, if possible, the etiological factor responsible for the inflammation.

3. Of the term now included under this title heading the following only are approved as acceptable inclusions: *Adenitis, lymphadenitis, lymphangitis, nonfilarial chylocele, nonfilarial chylous ascites, obliteration of lymphatic vessel, polyadenitis.*

4. The committee recommends the transfer to other titles of the following inclusions: To new tentative title No. 51B (*Diseases of the thymus gland*): *Atrophy of thymus gland, enlargement of thymus gland, lymphatism, persistent thymus gland, status lymphaticus, status thymicus, thymic asthma.*

85. Hemorrhage; Other Diseaseses of the Circulatory System.

1. This title is acceptable, without autopsy, but the site of the hemorrhage or name of vessel should be specified—also the cause. Any report of *Hemorrhage* should be queried by registration offices and by the Bureau of the Census as to cause and site of lesion.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Adams-Stokes disease, brachycardia, bradycardia, epistaxis, hemorrhage* (cause and site should be specified—see above), *heart block, paroxysmal tachycardia, Stokes-Adams disease, tachycardia.*

86. Diseases of the Nasal Fossae.

1. Names of diseases listed under this heading are acceptable reports of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Adenoids, cerebrospinal rhinorrhea, coryza, coryza of newborn, foreign body in nose.*

3. The committee recommends the transfer of the following terms to this title from present title No. 146 (*Diseases of the bones—tuberculosis excepted*): *Abscess of antrum of Highmore, of ethmoidal sinus, of frontal sinus, of maxillary sinus, of sphenoidal sinus, disease of frontal sinus, empyema of frontal sinus, ethmoidal sinusitis, ethmoiditis, frontal sinusitis, maxillary sinusitis, necrosis of antrum, necrosis of mastoid, sphenoidal sinusitis, sphenoiditis, suppuration of frontal sinus.*

87. Diseases of the Larynx.

1. The committee recommends that statements of the diseases included under this title be considered as acceptable statements of cause of death without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Catarrh of larynx, catarrh of throat, catarrhal croup, catarrhal laryngitis, congestion of glottis, epiglottiditis, gangrenous laryngitis, infective laryngitis, inflam-*

mation of larynx, intubation of larynx, laryngismus stridulus, laryngitis, edema of glottis, edema of larynx, paralysis of glottis, paralysis of larynx, phlegmonous laryngitis, spasm of glottis, spasm of larynx, spasmodic croup, spasmodic laryngitis, stenosis of larynx, stridulous croup, stridulous laryngitis, tumor of larynx (nonmalignant), ulcerative laryngitis.

88. Diseases of the Thyroid Body.

1. The committee is of the opinion that this title should not be classified under the class *Diseases of the respiratory system*, and recommends its transfer with acceptable inclusions to Class I (*General diseases*). (See tentative title of same name No. 51A.)

89. Acute Bronchitis.

1. This title is acceptable as a cause of death when reported for children under 5 years of age, without reservation, but for persons above that age, it is subject to inquiry as to whether a specific irritant was the cause of the bronchitis and whether additional lesions, capable of causing death, were present.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute bronchitis, acute bronchorrhea, acute capillary bronchitis, acute catarrhal bronchitis, acute pulmonary catarrh, acute purulent bronchitis, capillary bronchitis, croupous bronchitis, fibrinous bronchitis, subacute capillary bronchitis, tracheitis, tracheobronchitis.*

90. Chronic Bronchitis.

1. This title is an acceptable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable synonyms: *Bronchial catarrh, bronchiectasis, bronchorrhea, chronic bronchitis, chronic bronchorrhea, chronic capillary bronchitis, chronic catarrhal bronchitis, dilatation of bronchi, fetid bronchitis, peribronchitis, purulent bronchorrhea, subacute bronchitis, ulcerative bronchitis.*

3. The committee recommends the addition to the list of inclusions of the term *chronic purulent bronchitis*.

91. Bronchopneumonia.

1. The statement is an acceptable statement of cause of death, without autopsy.

2. It is the understanding of the committee that the Bureau of the Census has been testing returns of this disease by asking physicians in several thousand cases whether *bronchopneumonia* was the primary cause of death, or whether it occurred as a complication or sequel of

some other disease or abnormal condition. The result of this has been the collection of supplemental data, not on the original certificates, on the basis of which the *bronchopneumonia* was shown to have been the terminal and secondary condition in other diseases. This applied in about 20 per cent of the cases tested, all of which were those of children under 10 years of age. It is the sense of the committee that the practice the Bureau of the Census now pursues of bringing before the physicians concrete examples of what kind of information is necessary for accurate statistics of cause of death, showing them wherein they have failed to supply such information, is a practical step in the right direction in that its immediate effect is correction of faulty data, and its ultimate effect, if persevered in, will be the improvement of basic facts *at their source*.

Although *bronchopneumonia* is only one of the many returns covered by letters of inquiry now being sent to physicians by the Bureau of the Census, this committee on the accuracy of certified causes of death and their relation to mortality statistics wishes to register here its unqualified approval of the procedure.

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Aspiration pneumonia*, *bronchopneumonia*, *bronchopulmonitis*, *catarrhal inflammation of lung*, *catarrhal pneumonia*, *croupous bronchopneumonia*, *deglutition pneumonia*, *inhalation pneumonia*, *inspiration pneumonia*, *lobular pneumonia*, *septic bronchopneumonia*.

4. The committee recommends that the term *pneumonia*, without qualification, when no further information can be obtained, be assigned to this title instead of to present title No. 92, when reported for decedents under 5 years of age.

92. Pneumonia.

1. It is recommended that this title be subdivided; that a subtitle, *Lobar pneumonia* be created, which will be acceptable without autopsy, and that this be numbered 92A; subtitle 92B should have the caption *Pneumonia* (undefined), and is not acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions. The letter following each indicates the tentative subtitle under which each should be listed. *Acute hepatization of lung* (A), *acute inflammation of lung* (A), *acute interstitial pneumonia* (A), *acute pleuropneumonia* (B), *bilateral lobar pneumonia* (A), *bilateral pneumonia* (A), *central pneumonia* (A), *consolidation of lung* (A), *croupous pneumonia* (A), *diplococcus pneumonia* (A), *double pleuropneumonia* (B), *double pneumonia* (A), *fibrinous pneumonia* (A), *hepatization of lung* (A), *lobar pneumonia* (A),

septic pleuropneumonia (B), *solidification of lung* (A), *suppurative pneumonia* (B), *unresolved pneumonia* (A).

3. It is recommended that *pneumococcus pneumonia* be added to the list of inclusions of subtitle A.

4. The committee recommends that deaths of children under 5 years of age reported as due to *pneumonia*, without further qualification, be classified under title No. 91 (*Bronchopneumonia*), when no more definite data are secured on inquiry. Inquiry should always be made in such cases to determine whether the *pneumonia* was *bronchopneumonia* or *lobar pneumonia*, and whether it was the primary cause or occurred in the course of or following some other disease. *Pneumonia*, unfortunately, is sometimes used in cases where *hypostatic pneumonia* occurred as a terminal condition, and the primary condition in such cases is often not described.

93. Pleurisy.

1. *Pleurisy*, in the opinion of the committee, is an acceptable cause of death, without autopsy, but if returned as a cause of death without specified cause, inquiry should be made to ascertain whether it was due to *lobar pneumonia*, *acute rheumatism*, *tuberculosis*, or *traumatism*, and, if the last, whether the violence was accidental, suicidal, or homicidal, and what was the means of injury.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Chylous hydrothorax*, *diaphragmatic pleurisy*, *double empyema*, *double hydrothorax*, *double pleuritis*, *empyema*, *exudative pleurisy*, *fibrinous pleurisy*, *fibrous pleurisy*, *hemopneumothorax*, *hemothorax*, *hydropneumothorax*, *hydrothorax*, *plastic pleurisy*, *pleurisy with effusion*, *pleuritis*, *pleuropericarditis*, *pneumothorax*, *purulent pleurisy*, *pyopneumothorax*, *pyothorax*, *serofibrinous pleurisy*, *seropurulent pleurisy*, *subacute pleurisy*, *suppurative pleurisy*, *thoracic fistula*.

94. Pulmonary Congestion, Pulmonary Apoplexy.

1. It is recommended that title No. 94 be called *Pulmonary congestion*, and that the other name included in the present title, *pulmonary apoplexy*, be listed among the terms below. *Pulmonary congestion* is considered acceptable without autopsy only when the cause is specified—as for example, *accidental inhalation of irritating fumes*, or accompanying lesions which are known to lead to congestion of the lungs.

2. Of the terms now included under this title heading, the following only are approved as acceptable inclusions: *Apoplexy of lung*, *congestion of lung*, *hypostatic congestion of lung*, *hypostatic pneumonia*, *edema of lung*, *passive congestion of lung*, *pulmonary apoplexy*, *pulmonary congestion*, *pulmonary edema*, *pulmonary stasis*.

3. The committee recommends the transfer of the following terms to other titles: *Infarction of lung, pulmonary infarction* to title No. 82 (*Embolism and thrombosis*).

4. The committee recommends that an age qualification be placed upon this title, namely, *3 months and over*, and that deaths of infants under 3 months old reported from any of its included terms be classified under present title No. 152, subtitle 2 (*Other diseases of early infancy*).

5. Reports of the conditions listed under this heading should always be queried for the primary cause.

95. Gangrene of the Lung.

1. *Gangrene of the lung*, is, in the opinion of the committee, in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Gangrene of the lung, pulmonary gangrene*.

96. Asthma.

1. It is recommended that this title be discontinued and reports covered by present inclusions be transferred to present title No. 98 (*Other diseases of the respiratory system*).

2. Of the terms now included under this title heading the following only are approved for transfer as acceptable inclusions: *Asthma, asthmatic bronchitis, bronchial asthma, catarrhal asthma, Curschmann's disease, spasmodic asthma*.

97. Pulmonary Emphysema.

1. In the opinion of the committee this is an acceptable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Congenital emphysema, emphysema of lung, hypertrophic emphysema, interlobular emphysema, pulmonary emphysema, senile emphysema, vesicular emphysema*.

98. Other Diseases of the Respiratory System (Tuberculosis Excepted).

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its acceptableness or nonacceptableness, without autopsy.

2. The committee recommends that the parenthetical expression (*tuberculosis excepted*) be omitted from the title heading and that to the note now following the list of inclusions be added *or tuberculosis of respiratory organs*.

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of lung (only*

with cause stated), *anthracosis of lung*, *aspergillosis of lung*, *axe-grinders' disease*, *chronic hepatization of lung*, *chronic inflammation of lung*, *chronic interstitial inflammation of lung*, *chronic interstitial pneumonia*, *chronic pleuropneumonia*, *chronic pneumonia*, *chronic pneumonitis*, *colliers' lung*, *grinders' asthma*, *hay asthma*, *hay fever*, *hernia of lung*, *interstitial pneumonia*, *miners' asthma*, *pneumoconiosis*, *potters' asthma*, *pulmonary abscess* (only with cause stated), *pulmonary anthracosis*, *stenosis of bronchi*, *stenosis of trachea*, *stonemasons' lung*, *tracheostenosis*, *tumor of lung* (nonmalignant), *tumor of pleura* (nonmalignant), *tumor of trachea* (nonmalignant), *ulcer of bronchi*, *ulcer of trachea*.

4. The committee recommends that the following terms be added to the list of inclusions: *Metal polishers' disease*, *tumor of bronchi* (nonmalignant).

5. The committee recommends the transfer of the following terms from title No. 96 (*Asthma*): *Asthma*, *asthmatic bronchitis*, *bronchial asthma*, *catarrhal asthma*, *Curschmann's disease*, *spasmodic asthma*.

6. The committee recommends the transfer of the term *hydatid cyst of lung* to title No. 107 (*Intestinal parasites*).

99. Diseases of the Mouth and Annexa.

1. It is recommended that this title be acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Glossitis*, *Mikulicz's disease*, *pyorrhea alveolaris*, *Rigg's disease*, *stomatitis*, *thrush*, *tumor of gum* (nonmalignant),¹ *tumor of lip* (nonmalignant),¹ *tumor of mouth* (nonmalignant),¹ *tumor of parotid gland* (nonmalignant),¹ *tumor of salivary gland* (nonmalignant),¹ *tumor of tongue* (nonmalignant),¹ *Ulorrhagia*.

3. The committee recommends the transfer of the following terms: *Muguet*, to title No. 19 (*Other epidemic diseases*); *odontoma*, to the prefatory note on nonmalignant tumors preceding title No. 39.

100. Diseases of the Pharynx.

1. It is recommended that the caption of this title be changed to *Diseases of the pharynx and tonsils* and be considered acceptable as a cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of pharynx*, *abscess of tonsil*, *angina Ludovici*, *cellulitis of pharynx*, *follicular amygdalitis*, *follicular tonsillitis*, *Ludwig's angina*, *Ludwig's disease*, *nasopharyngeal abscess*, *parenchymatous tonsillitis*, *peritonsillar abscess*, *postpharyngeal abscess*, *quinsy*, *retropharyngeal abscess*, *stricture of pharynx* (with cause of stricture and manner of death stated, e. g.,

¹ With specification of nature and exact site.

starvation), *suppurative tonsillitis*, *tonsillopharyngeal abscess*, *tumor of pharynx* (nonmalignant), *tumor of throat* (nonmalignant), *tumor of tonsil* (nonmalignant), *tumor of uvula* (nonmalignant).

3. The committee recommends that the term *tumor of fauces* (nonmalignant) be added to the list of inclusions.

4. The committee recommends the transfer of *septic disease of throat* and *septic sore throat* to the new tentative title 18C (*Septic sore throat*) and of *Vincent's angina* to title No. 19 (*Other epidemic diseases*).

101. Diseases of the Esophagus.

1. The committee is of the opinion that this title should be considered acceptable, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of esophagus*, *obstruction of esophagus*, *stenosis of esophagus*, *stricture of esophagus*, *tumor of esophagus* (nonmalignant).

3. Returns of *stricture of* and *stenosis of the esophagus*, without qualification, should be queried to ascertain whether due to congenital stenosis, cicatricial contraction or tumor of the esophagus, to pressure from surrounding parts or other discernible cause.

4. The committee recommends the transfer of the term *foreign body in esophagus* to title No. 186 (*Other external violence*).

102. Ulcer of the Stomach.

1. The committee recommends that the caption of this title be changed to *Ulcer of stomach or duodenum*, and that it be considered unacceptable unless verified by autopsy or operation.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Gastric ulcer*, *gastro-duodenal ulcer*, *gastroesophageal ulcer*, *peptic ulcer*, *perforating gastric ulcer*, *perforating ulcer of stomach*, *round ulcer of stomach*, *ulcer of pylorus*, *ulcer of stomach*, *ulcus rotundum*, *ulcus ventriculi*.

3. The committee recommends that the terms *duodenal ulcer* and *ulcer of duodenum* be transferred to this title from titles Nos. 104 and 105 (*Diarrhea and enteritis*).

103. Other Diseases of the Stomach (Cancer Excepted).

1. The committee recommends that the caption of this title be changed to *Other diseases of the stomach* and that to the footnote beginning *This title does not include*, be added the words *tuberculosis of the stomach* (31). In the opinion of the committee the title is not acceptable unless verified by autopsy or operation.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of stomach*,

cardiospasm (for children under 1 year of age), *gangrene of stomach*, *hematemesis* (with etiology), *hemorrhagic gastritis*, *hypertrophic stenosis of pylorus*, *laceration of stomach* (not external violence; with etiology and fatal symptoms), *obstruction of pylorus* (with etiology), *perforation of stomach* (nontraumatic; with etiology), *phlegmonous gastritis*, *pylorospasm* (-ly), *rupture of stomach* (nontraumatic; with etiology), *stenosis of pylorus* (nonmalignant; with etiology), *stricture of cardia of stomach* (nonmalignant; with etiology), *stricture of pylorus* (nonmalignant; with etiology), *stricture of stomach* (nonmalignant; with etiology), *vomiting of blood*.

3. The committee recommends that the term *tumor of stomach* (nonmalignant) be added to the list of inclusions.

4. The committee recommends that the term *foreign body in stomach* be transferred to title No. 186 (*Other external violence*).

104. Diarrhea and Enteritis (Under 2 Years).

1. The committee recommends that this title be placed in the acceptable class, without autopsy.

2. The committee recommends that this title be subdivided into (A) *Acute diarrhea and enteritis* and (B) *Chronic diarrhea and enteritis*, and that unless otherwise specified or self-evident, the inclusions shall appear under both (A) and (B).

3. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Catarrhal colitis* (state whether acute or chronic), *catarrhal diarrhea* (state whether acute or chronic), *catarrhal enteritis* (state whether acute or chronic), *catarrhal gastroduodenitis* (state whether acute or chronic), *catarrhal gastroenteritis* (state whether acute or chronic), *catarrhal ileocolitis* (state whether acute or chronic), *croupous colitis*, *croupous enteritis*, *diarrhea due to food*, *endemic diarrhea*, *enteritis*, *enterocolitis* (-2y), *gastroenteritis* (-2y), *hemorrhagic colitis*, *hemorrhagic enteritis*, *hemorrhagic gastroenteritis*, *ileocolitis* (-2y), *infantile diarrhea*, *infantile enteritis*, *membranous colitis*, *membranous enteritis*, *membranous enterocolitis*, *membranous ileocolitis*, *mucoenteritis*, *necrotic colitis*, *perforating ulcer of intestine* (with autopsy), *phlegmonous enteritis*, *sarcinal infection* (with proof), *sigmoiditis* (with proof), *ulcer of colon* (with autopsy), *ulcer of intestine* (with autopsy), *ulceration of colon*, *ulceration of ileum*, *ulceration of intestine*, *ulcerative colitis*, *ulcerative enteritis*, *ulcerative enterocolitis*, *ulcerative ileocolitis*, *ulcerative perforation of intestine*.

4. The committee recommends that all reports of conditions now listed under title No. 13 (*Cholera nostras*) be classified under this title if encountered on death certificates of children under 2 years of age. These terms, however, are all indefinite and obsolete. It is also recommended that the term *pseudomembranous enteritis* be trans-

ferred to this title from title No. 110 (*Other diseases of the intestines*) when reported for children under 2 years of age.

5. The committee recommends the transfer of *duodenal ulcer* and *ulcer of duodenum* to title No. 102 (*Ulcer of the stomach*); *flagellate diarrhea* to title No. 107 (*Intestinal parasites*).

105. Diarrhea and Enteritis (2 Years and Over).

1. The conclusions for the preceding title are in force for this title with the following exceptions: The terms *enterocolitis*, *gastroenteritis*, and *ileocolitis*, without further qualification, are not approved as acceptable inclusions without autopsy for decedents 2 years of age or over.

106. Ankylostomiasis.

1. The committee recommends that this title be placed in the acceptable class, provided the infectious parasite *ankylostoma duodenale* or its ova have been demonstrated.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Ankylostomiasis*, *hookworm disease*, *necatoriasis*, *uncinariasis*.

3. The committee recommends the addition of the following terms to the list of inclusions: *Infection by ankylostoma duodenale*, *infection by uncinaria americana*, *necator americana*,

107. Intestinal Parasites.

1. The committee recommends that the caption of this title be changed to *Other intestinal parasites* and be considered acceptable only with demonstration of the parasite or its ova in the tissues or discharges.

2. The committee recommends that the title be subdivided into (A) *Infection by cestoda*, (B) *Infection by trematoda*, (C) *Infection by nematoda*, (D) *Infection by coccidia*.

3. Of the terms now included under this title heading the following only are approved as acceptable synonyms:

(A) *Infection by cestoda* (Tapeworm)—

Dibothriocephalus latus.

Bothriocephalus latus.

Tenia saginata (Taeniasis; Teniasis).

Tenia solium (Taeniasis; Teniasis).

Cysticercus cellulosae (Taeniasis; Teniasis).

Other cestodes.

(B) *Infection by trematoda* (Distomiasis)—

Fasciola hepatica (Fascioliasis).

Distomum hepaticum.

Paragonimus westermani (Paragonimiasis).

(B) *Infection by trematoda* (Distomiasis)—Continued.

Distomum pulmonale.

Schistosomum hematobium (Bilharziasis) (Schistosomiasis).

Distomum hematobium (Schistosomiasis).

Bilharzia hematobium (Schistosomiasis).

Schistosomum japonicum (Schistosomiasis).

Other trematodes (Schistosomiasis).

(C) *Infection by nematoda* (Round worm)—

Ascaris lumbricoides (ascariasis).

Oxyuris vermicularis (oxyuriasis).

Trichocephalus trichiura (Trichocephaliasis).

Trichocephalus dispar.

Trichinella spiralis (Trichinelliasis, Trichiniasis).

Trichina spiralis.

Filaria (several species) (Filariasis).

Filaria (microfilaria) *sanguinis hominis*.

Strongyloides stercoralis (Anguilluliasis).

Anguillula intestinalis or *stercoralis*.

Rhabdonema strongyloides or *intestinale*.

Other nematodes.

(D) *Infection by coccidia*—

Coccidiasis.

4. The committee recommends the transfer to this title of the term *hydatid cyst of lung* from title No. 98 (*Other diseases of the respiratory system*), *echinococcus cyst of liver* from present title No. 112 (*Hydatid tumor of the liver*); *flagellate diarrhea* from titles 104 and 105 (*Diarrhea and enteritis*); *hydatid cyst of spleen* from present title No. 116 (*Diseases of the spleen*); *hydatid cyst of kidney* from title 122 (*Other diseases of the kidneys and annexa*); *hydatid cyst of breast* from present title No. 133 (*Nonpuerperal diseases of the breast*).

108. Appendicitis and Typhlitis.

1. This title is considered unacceptable unless verified by operation or autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of appendix*, *abscess of iliac fossa*, *abscess of vermiform appendix*, *appendicitis*, *appendicular abscess*, *fulminating appendicitis*, *gangrenous appendicitis*, *perforative appendicitis*, *pericecal abscess*, *perityphlitic abscess*, *perityphlitis*, *postcecal abscess*, *recurrent appendicitis*, *ruptured appendix*, *sloughing appendix*, *suppurative appendicitis*, *typhlitis*, *typhlo-dichilitis*.

3. The committee recommends the transfer of the term *tumor of appendix* to title No. 110 (*Other diseases of the intestines*).

109. Hernia, Intestinal Obstruction.

CONCLUSIONS ON SUBTITLE 1—HERNIA.

1. This subtitle is considered acceptable if the hernia is external; or is exposed on operation or autopsy, when internal; also when conditions adequate to cause death, together with type of hernia, are specified.

2. Of the terms now included under this subtitle the following only are approved as acceptable inclusions: *Gangrenous hernia*, *incarcerated hernia*, *strangulated hernia* (each with site specified).

CONCLUSIONS ON SUBTITLE 2—INTESTINAL OBSTRUCTION.

1. This subtitle is considered unacceptable unless the obstruction is demonstrated on autopsy or operation or is accessible by examination through the body orifices.

2. Of the terms now included under this subtitle the following only are approved as acceptable inclusions: *Ileus*, *intestinal obstruction* (site and cause of obstruction to be specified), *intussusception*, *volvulus*.

110. Other Diseases of the Intestines.

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its acceptableness or nonacceptableness without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of Meckel's diverticulum*, *diverticulitis*, *enteric paralysis* (with adequate etiology), *fecal impaction*, *gangrene of rectum*, *impaction of feces*, *ischioanal abscess*, *paralysis of colon* (with adequate etiology), *paralysis of intestine* (with adequate etiology), *perforation of bowel* (with adequate etiology), *perforation of intestine* (with adequate etiology), *periproctitis*, *perirectal abscess*, *perirectal cellulitis*, *procidentia recti*, *rupture of duodenum* (with adequate etiology), *rupture of rectum* (with adequate etiology), *stricture of anus* (with adequate etiology), *stricture of rectum* (with adequate etiology), *tumor of anus* (nonmalignant), *tumor of rectum* (nonmalignant).

3. The committee recommends the transfer of the following inclusions to other titles: *Foreign body in appendix* to title No. 108 (*Appendicitis and typhlitis*); *foreign body in intestine*, *foreign body in rectum* to title No. 186 (*Other external violence*); *psilosis*, *sprue* to present title No. 25 (*Mycoses*) and thence to title No. 19 (*Other epidemic diseases*); *melaena* (under 3 months) to title No. 152, subtitle 2 (*Other diseases of early infancy*); *pseudomembranous enteritis* to title No. 104 or 105 (*Diarrhea and enteritis*).

111. Acute Yellow Atrophy of the Liver.

1. It is recommended that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute atrophy of liver*, *acute parenchymatous hepatitis*, *acute yellow atrophy of liver*, *icterus gravis*, *malignant hepatitis* (1y+), *malignant icterus* (1y+), *malignant jaundice* (1y+), *pernicious icterus*.

3. The committee recommends that the terms *acute infective jaundice* and *Weil's disease* be transferred to title No. 19 (*Other epidemic diseases*).

112. Hydatid Tumor of the Liver.

1. The committee recommends that this title be eliminated and that the term *echinococcus cyst of liver* be transferred to title No. 107, the new tentative title of which is *Other intestinal parasites*.

113. Cirrhosis of the Liver.

1. It is recommended that this title be considered in the acceptable class without autopsy, it being understood that where cirrhosis is due to syphilis deaths should be classified under title No. 37 (*Syphilis*); also that in the arrangement of the included terms a subtitle should be established to comprehend alcoholic cirrhosis and synonymous terms. None of the terms listed under this subtitle should be used unless there was a definite history of *chronic alcoholism*.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions, those followed by the letter (A) to be listed under the subtitle covering *alcoholic cirrhosis*: *Alcoholic cirrhosis* (A), *alcoholic cirrhosis of liver* (A), *atrophic cirrhosis* (A), *atrophic cirrhosis of liver* (A), *cirrhosis of Laënnec*, *cirrhosis of liver*, *congenital cirrhosis of liver* (1y+), *congenital hepatic cirrhosis* (1y+), *Hanot's disease*, *hepatic cirrhosis*, *hobnail liver* (A), *hypertrophic cirrhosis*, *hypertrophic cirrhosis of liver*.

3. The committee recommends that returns of *congenital cirrhosis of liver* be queried for syphilis.

4. The committee recommends the transfer to this title of the term *hypertrophic hepatitis* from title No. 115 (*Other diseases of the liver*).

5. The committee recommends the transfer of the following terms to title No. 55 (*Other general diseases*): *Amyloid degeneration of liver*, *amyloid liver*, *lardaceous degeneration of liver*, *lardaceous liver*, *large waxy liver*, *waxy degeneration of liver*, *waxy liver*.

114. Biliary Calculi.

1. It is recommended that the caption of this title be changed to *Cholelithiasis* and that it be placed in the acceptable class without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Biliary colic*, *biliary lithiasis*, *cholelithiasis*, *colic from gall stones*, *impacted gall stones*.

115. Other Diseases of the Liver.

1. It is the recommendation of the committee that the name of this title be changed to *Other diseases of the liver and biliary system*, and be considered unacceptable, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of gall bladder*, *abscess of liver* (etiological factor must be specified), *acute catarrhal jaundice* (1y+), *angiocholecystitis*, *angiocholitis*, *biliary fistula*, *catarrh of bile duct*, *catarrhal cholangitis*, *catarrhal icterus* (1y+), *catarrhal jaundice* (1y+), *cholangitis*, *cholecystitis*, *choledochitis*, *chronic catarrhal jaundice*, *diffuse suppurative hepatitis*, *empyema of gall bladder*, *gangrene of gall bladder*, *gangrene of gall duct*, *hematogenous icterus* (1y+), *hematogenous jaundice* (1y+), *infectious cholecystitis*, *necrosis of gall bladder*, *perforation of bile duct* (with cause), *perforation of gall bladder* (with cause), *perforation of gall duct* (with cause), *rupture of bile duct* (with cause), *rupture of gall bladder* (with cause), *rupture of gall duct* (with cause), *stenosis of bile duct* (with cause), *stenosis of gall duct* (with cause), *stricture of common duct* (with cause), *stricture of gall bladder* (with cause), *stricture of gall duct* (with cause), *suppuration of gall bladder*, *suppurative cholangitis*, *suppurative cholecystitis*, *suppurative choledochitis*, *tumor of bile duct* (nonmalignant), *tumor of gall bladder* (nonmalignant), *tumor of gall duct* (nonmalignant), *tumor of liver* (nonmalignant).

3. The committee recommends the transfer of the following inclusions to other titles: *Hypertrophic hepatitis* to title No. 113 (*Cirrhosis of the liver*), tentative subtitle (B) (*Other cirrhoses*); *tropical abscess of the liver* to title No. 14 (*Dysentery*).

116. Diseases of the Spleen.

1. The committee recommends that this title be considered unacceptable unless verified by operation or autopsy; it recommends, further, that the title be removed from Class V (*Diseases of the digestive system*) and be inserted between titles No. 52 and No. 53 in the class of *General diseases*. (See tentative title No. 52B.)

117. Simple Peritonitis (Nonpuerperal).

1. It is recommended that the name of this title be changed to *Peritonitis (nonpuerperal)* and that it be placed in the unacceptable class without autopsy; also that all reports under this heading be queried by registration offices and by the Bureau of the Census in order to secure statement of the primary cause.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute general peritonitis, general purulent peritonitis, acute fibrinous peritonitis, acute sero-fibrinous peritonitis, acute suppurative peritonitis, acute hemorrhagic peritonitis.*

3. The committee recommends the addition of the term *acute fibrinopurulent peritonitis* to the list of inclusions.

4. The committee recommends the transfer of the terms *foreign body in peritoneum* and *traumatic peritonitis* to title No. 186 (*Other external violence*).

117A. Diseases of the Pancreas. (Tentative new title.)

1. The committee recommends that a new title with the above caption be established to follow present title No. 117, and that the new title be placed in the unacceptable class, without autopsy.

2. The committee recommends the transfer of the following terms now listed under title No. 118 (*Other diseases of the digestive system*): *Acute pancreatitis, acute suppurative pancreatitis, acute hemorrhagic pancreatitis, chronic suppurative pancreatitis, chronic interstitial pancreatitis, tumor of pancreas (nonmalignant), abscess of pancreas, acute gangrenous pancreatitis.*

3. The committee recommends the addition of the term *calculus of pancreatic duct.*

118. Other Diseases of the Digestive System (Cancer and Tuberculosis excepted).

1. It is recommended that this title be eliminated because of the transfer of all its approved inclusions to more appropriate title headings.

2. The committee has recommended the transfer of many inclusions from this title to the new tentative title 117A (*Diseases of the pancreas*), which see.

119. Acute Nephritis.

1. This title should not be accepted as a primary and exclusive cause of death without autopsy. In all such cases the physician should report the primary condition which led to the nephritis. Reports of it should be queried, therefore, to ascertain whether it appeared as a complication or sequela of some other disease or abnormal condition, and if so the exact nature of the same; it is especially important to query suspected puerperal cases.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Acute albuminous nephritis, acute diffuse nephritis, acute exudative nephritis, acute glomerulonephritis, acute hemorrhagic nephritis, acute interstitial nephritis, acute nephritis, acute parenchymatous nephritis, acute*

tubular nephritis, glomerular nephritis, glomerulonephritis, subacute nephritis.

120. Bright's Disease.

1. It is recommended that this title be considered in the acceptable class, without autopsy,¹ but suggested that the caption be changed to *Chronic Bright's disease*.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Bright's disease, cardiorenal sclerosis, chronic Bright's disease, chronic diffuse nephritis, chronic exudative nephritis, chronic glomerulonephritis, chronic interstitial nephritis, chronic nephritis, chronic parenchymatous nephritis, chronic tubular nephritis, diffuse nephritis, diffuse interstitial nephritis, gouty kidney, granular kidney, hypertrophic interstitial nephritis, large white kidney.*

3. The committee recommends the transfer to other titles of the following terms: *Amyloid degeneration of kidney, lardaceous degeneration of kidney, waxy degeneration of kidney* to title No. 55 (*Other general diseases*); *purulent nephritis, septic nephritis* to title No. 122 (*Other diseases of the kidneys and annexa*).

121. Chyluria.

1. It is recommended that this title be eliminated and that the terms now listed under it be included, if at all, under title No. 124 (*Diseases of the bladder*).

122. Other Diseases of the Kidneys and Annexa.

1. It is recommended that this title be considered unacceptable unless operation or autopsy was performed, or after inquiry.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of kidney, cyst of kidney, cystic degeneration of kidney, cystic disease of kidney, hydronephrosis, infarct of kidney, nephritic abscess, perinephric abscess, perinephritic abscess, perirenal abscess, pyelitis, pyelonephritis, pyonephritis, pyonephrosis, renal abscess, renal cyst, suppurative nephritis, suppurative pyelitis, tumor of kidney (nonmalignant).*

3. The committee recommends that the term *tumor of ureter* (non-malignant) be added to the list of inclusions.

4. The committee recommends the transfer of the terms *purulent nephritis* and *septic nephritis* to this title from title No. 120 (*Bright's disease*).

5. The committee recommends that the term *hydatid cyst of kidney* be transferred to title No. 107 (*intestinal parasites*).

¹ It was agreed, however, that in preparing its report on this title, the committee would call attention to the very considerable error in unautopsied diagnoses of deaths from chronic nephritis, with the suggestion that there are good reasons for excluding this from the acceptable class.

123. Calculi of the Urinary Passages.

1. It is recommended that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Calculus of bladder, calculus of kidney, calculus of pelvis of kidney, calculus of ureter, calculus of urethra, impacted calculus of kidney, impacted calculus of ureter, impacted calculus of urethra, nephrolithiasis, pyonephrosis from calculus, renal calculus, renal colic, stone in bladder, stone in kidney, urinary calculus, urinary lithiasis, vesical calculus.*

124. Diseases of the Bladder.

1. It is recommended that *Diseases of the bladder* be put into the acceptable class, without autopsy, and be subdivided into (A) *Cystitis* and (B) *Other diseases of the bladder.*

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Gangrenous cystitis, purulent cystitis, pyocystitis, suppurative cystitis*, under subtitle (A); and *gangrene of bladder, papilloma of bladder, rupture of bladder* (non-traumatic), *tumor of bladder* (nonmalignant), and *vesical abscess* under subtitle (B).

3. The committee recommends the transfer of the term *foreign body in bladder* to title No. 186 (*Other external violence*).

4. The committee recommends the transfer to this title of the terms now listed under title No. 121 (*Chyluria*): *Chyluria, galacturia, hematochyluria, lipemia, lipuria, nonfilarial chyluria, piarrhemia, tropical hematuria.*

125. Diseases of the Urethra, Urinary Abscess, etc.

1. It is recommended that present headings Nos. 125, 126, and 127 be placed under a title to be called *Diseases of the male genital organs* and that this title be considered acceptable, without autopsy. A footnote should follow the new title stating that it does not include cancer, tuberculosis, or syphilitic or gonococcic lesions of the male genital organs.

2. Of the terms now included under these title headings (125, 126, 127) the following only are approved as acceptable inclusions: *Calculus of prostate, enlargement of prostate, epididymitis, hydrocele, hydrocele of spermatic cord, hydrocele of tunica vaginalis, hypertrophy of prostate, laceration of urethra* (not external violence), *orchitis, phimosis* (not congenital), *prostatitis, prostatocystitis, rupture of urethra* (not external violence), *spermatocele, stricture of urethra, tumor of penis* (nonmalignant), *tumor of scrotum* (nonmalignant), *tumor of prostate* (nonmalignant), *tumor of testicle* (nonmalignant), *tumor of urethra* (nonmalignant).

3. The committee recommends the addition of the term *tumor of spermatic cord* (nonmalignant) to the list of inclusions.

4. The committee recommends the transfer to title No. 171 (*Traumatism by cutting or piercing instruments*) of the term *circumcision*, and to title No. 186 (*Other external violence*) of the terms *foreign body in urethra* and *traumatic orchitis*.

5. The following terms under present title No. 125 are automatically transferred from the new tentative title as the latter relates to deaths of males only, and the committee recommends their transfer to the new tentative title *Diseases of the other female genital organs*, subtitle (C) *Other diseases: Fistula of vagina, urethrovaginal fistula, uterovesical fistula, vesicometrorectal fistula, vesicovaginal fistula*. These terms, however, are not approved by the committee as acceptable statements of cause of death. The committee mentions them here merely to emphasize the fact that, while heretofore classified under present title No. 125, which has no sex limitation, they are excluded from the new tentative title which relates to males only.

126. Diseases of the Prostate.

1. See conclusions on present title No. 125 (*Diseases of the urethra, urinary abscess, etc.*).

127. Nonvenereal Diseases of the Male Genital Organs.

1. See conclusions on present title No. 125 (*Diseases of the urethra, urinary abscess, etc.*).

128. Uterine Hemorrhage (Nonpuerperal).

1. It is recommended that this title be stricken out and that all acceptable inclusions be transferred to title No. 130 (*Other diseases of the uterus*).

2. Of the terms now included under this title heading the following only are approved as acceptable for transfer as noted above: *Hemorrhage of uterus* (nonpuerperal), *hemorrhage of womb* (nonpuerperal), *hemorrhagic metritis* (nonpuerperal), *intrauterine hemorrhage* (nonpuerperal), *uterine hemorrhage* (nonpuerperal).

129. Uterine Tumor (Noncancerous).

1. It is recommended that this title be placed in the acceptable class without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Fibroid of body of uterus*, *fibroid of cervix of uterus*, *fibroid of uterus*, *fibroma of uterus*, *fibromyoma of uterus*, *tumor of uterus* (nonmalignant).

3. The committee recommends the transfer of the term *deciduoma* to title No. 42 (*Cancer of the female genital organs*).

130. Other Diseases of the Uterus.

1. It is recommended that this title be placed in the acceptable class without autopsy with the understanding that when the specific cause is described the death is to be classified thereunder.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Purulent endometritis*, *pyometra*, *septic endometritis* (nonpuerperal), *septic metritis* (nonpuerperal), *septic phlebitis of uterus* (nonpuerperal), *suppurative metritis*.

3. It is recommended that all acceptable terms under present title No. 128 (*Uterine hemorrhage—nonpuerperal*) be transferred to this title. (See conclusions on title No. 128.)

4. It is recommended that the terms *traumatic metritis* and *rupture of uterus* (nonpuerperal) be transferred to title No. 186 (*Other external violence*.)

131. Cysts and Other Tumors of the Ovary.

1. It is recommended that titles 131 and 132 be combined under a new title to be called *Diseases of the other female genital organs*, and that this title be subdivided into (A) *Salpingitis*,¹ (B) *Nonmalignant ovarian tumor*, and (C) *Other diseases*. It is the opinion of the committee that the title should be in the unacceptable class, without operation or autopsy.

2. Of the terms now included under present titles Nos. 131 and 132 the following only are approved as acceptable inclusions: Under subtitle (A), *purulent salpingitis*, *pus tube*, *pyosalpingitis*, *pyosalpinx*, *rupture of pus tube*, *rupture of tubal abscess*, *ruptured pyosalpinx*, *salpingitis*, *salpingo-oophoritis*, *salpingo-ovaritis*, *septic salpingitis*, *suppuration of fallopian tube*; under subtitle (B), *cyst of ovary*, *cystic ovary*, *dermoid cyst of ovary*, *fibroid of ovary*, *hematoma of ovary*, *ovarian cyst*, *parovarian cyst*, *tumor of ovary* (nonmalignant); under subtitle (C), *cystic oophoritis*, *cystic ovaritis*, *hematosalpinx*, *oophoritis*, *ovaritis*, *pyo-oophoritis*, *rupture of fallopian tube*, *nonmalignant tumor of broad ligament*, *of vagina*, *of vulva*.

3. The committee recommends that several terms under present title No. 125 (*Diseases of the urethra, urinary abscess, etc.*) be classified under this title, if encountered. As none of these is approved as an acceptable inclusion, they are not listed here. (See conclusions on title No. 125.)

132. Salpingitis and Other Diseases of the Female Genital Organs.

1. See conclusions on present title No. 131, with which it is the recommendation of the committee that this title be consolidated.

¹ All conditions under this subtitle refer to nongonococcal inflammation of the tubes.

133. Nonpuerperal Diseases of the Breast (Cancer Excepted).

1. It is recommended that this title be called *Diseases of the breast*, with a footnote to indicate that this title does not include *cancer*. It should be placed in the acceptable class without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Suppuration of breast*, *suppuration of mammary gland*, *tumor of breast* (nonmalignant) *tumor of mammary gland* (nonmalignant).

3. The committee recommends the transfer of all terms now listed under present title No. 141 (*Puerperal diseases of the breast*) to this title.

4. The committee recommends the transfer of the term *hydatid cyst of breast* to title No. 107 (*Intestinal parasites*), and of *Paget's disease of nipple* to title No. 43 (*Cancer and other malignant tumors of the breast*).

Class VII. The Puerperal State. (Present titles 134 to 141.)

The committee recommends that the titles under this class be as follows:

ABORTION—acceptable without autopsy.

PUERPERAL HEMORRHAGE—acceptable without autopsy.

PUERPERAL SEPTICEMIA—acceptable without autopsy.

PUERPERAL ALBUMINURIA AND CONVULSIONS—acceptable without autopsy.

OTHER DISEASES OF PREGNANCY, LABOR, AND THE PUERPERIUM—acceptable without autopsy.

The committee recommends that the following terms be included under the title to be known as ABORTION: *Abortion*, *accidental abortion*, *induction of abortion*, *induction of premature labor*, *miscarriage*, *tubal abortion*.

The committee recommends that the following terms be included under the title to be known as PUERPERAL HEMORRHAGE: *Accidental hemorrhage of parturition*, *accidental hemorrhage of puerperium*, *adherent placenta*, *detachment of placenta*, *hemorrhage after labor*, *hemorrhage during parturition*, *hemorrhage from detachment of placenta*, *hemorrhage from uterus after parturition*, *hemorrhage from uterus during parturition*, *hemorrhage (puerperium)*, *malposition of placenta*, *placenta praevia*, *postpartum hemorrhage*, *puerperal hemorrhage*, *retained membranes*, *retained placenta*, *retained secundines*, *retention of placenta*, *separation of placenta*.

The committee recommends that the following terms be included under the title to be known as PUERPERAL SEPTICEMIA: *Postpartum pyemia*, *postpartum sepsis*, *postpartum septicemia*, *puerperal cellulitis*, *puerperal endometritis*, *puerperal erysipelas*, *puerperal fever*, *puerperal inflammation of uterus*, *puerperal lymphangitis*, *puerperal*

metritis, puerperal metroperitonitis, puerperal metrosalpingitis, puerperal pelvic cellulitis, puerperal pelvic peritonitis, puerperal peritoneal infection, puerperal peritonitis, puerperal periuterine cellulitis, puerperal purulent endometritis, puerperal pyemia, puerperal salpingitis, puerperal sapremia, puerperal sepsis, puerperal septic endometritis, puerperal septic fever, puerperal septic infection, puerperal septic metritis, puerperal septic peritonitis, puerperal septicaemia, puerperal suppurative metritis.

The committee recommends that the following terms be included under the title to be known as **PUPERPERAL ALBUMINURIA AND CONVULSIONS**: *Eclampsia gravidarum, eclampsia of labor, eclampsia of pregnancy, postpartum eclampsia, postpuerperal nephritis, puerperal albuminuria, puerperal convulsions, puerperal eclampsia, puerperal nephritis, puerperal toxemia, puerperal uremia, toxemia of pregnancy, uremia of pregnancy.*

The committee recommends that the following terms be included under the title to be known as **PUPERPERAL PHLEBITIS AND EMBOLISM**: *Puerperal embolism, puerperal embolism of lung, puerperal phlebitis, phlegmasia alba dolens, sudden death from cardiac embolism after delivery, sudden death from cardiac thrombosis after delivery, sudden death from cerebral hemorrhage after delivery, sudden death from entrance of air into vein after delivery, sudden death from pulmonary embolism after delivery, sudden death from pulmonary thrombosis after delivery, venous thrombosis consequent on parturition.*

The committee recommends that the following terms be included under the title to be known as **OTHER DISEASES OF PREGNANCY, LABOR, AND THE PUPERPERIUM**: *Abdominal pregnancy, antepartum hemorrhage, ectopic gestation, ectopic pregnancy, emesis gravidarum, hyperemesis gravidarum, hyperemesis of pregnancy, persistent vomiting (pregnancy), puerperal vomiting, tubal pregnancy, uncontrollable vomiting of pregnancy, vomiting of pregnancy, breech presentation (mother), Caesarean section, delayed delivery (mother), difficult labor (mother), dystocia (mother), laceration of cervix (parturition), laceration of perineum (parturition), laceration of peritoneum (parturition), laceration of urinary bladder (parturition), laceration of uterus (parturition), laceration of vagina (parturition), laceration of vulva (parturition), prolonged labor (mother), protracted labor (mother), rupture of bladder (parturition), puerperal insanity, puerperal mania, puerperal melancholia.*

142. Gangrene.

1. The committee recommends that the terms listed under present titles 142 (*Gangrene*), 143 (*Furuncle*), and 144 (*Acute abscess*), be transferred to title No. 20 (*Purulent infection and septicemia*) with the recommendation that inquiry as to location of the lesions, when

not stated, be made. It is agreed that where the location of the pus process is obviously insufficient to cause death, *per se*, without the presence of accompanying septicemia, such cases should be assigned to title No. 20; but where the localized purulent process or abscess affects an important organ or tissue such as the brain, kidney, lung, liver, etc., it is to be accepted and classified as an abscess of that particular organ in accordance with standard practice.

2. The following terms are approved as acceptable for transfer to title No. 20: *Cancerum oris, dermatitis gangrenosa, dry gangrene, gangrene* (nontraumatic—site of lesion must be specified), *malignant edema, moist gangrene, noma of mouth, noma of vulva, phagedena of penis, phagedena of vulva*.

3. The committee recommends the transfer of *Raynaud's disease* to title No. 81 (*Diseases of the arteries*).

143. Furuncle.

1. See conclusions under title No. 142.

2. The following inclusions are approved for transfer to title No. 20: *Carbuncle* (site must be specified), *furunculosis, malignant carbuncle, multiple carbuncle*.

144. Acute Abscess.

1. See conclusions under title No. 142.

2. Approved for transfer to title No. 20 (*Purulent infection and septicemia*): *Abscess* (site and nature of infection must be specified, and complication resulting from it).

145. Other Diseases of the Skin and Annexa.

1. By the transfer of titles 142, 143, and 144 to title No. 20 (*Purulent infection and septicemia*) this title is the only one that will remain in Class VIII (DISEASES OF THE SKIN AND OF THE CELLULAR TISSUE). In the opinion of the committee it should be considered as acceptable, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Bedsore* (site must be specified), *chronic ulcer* (site must be specified), *decubitis, dermatitis venenata, ecthyma, herpes zoster, infantile eczema* (under 1 year), *malignant pemphigus, pemphigus, pemphigus neonatorum, shingles, zona*.

146. Diseases of the Bones (Tuberculosis Excepted).

1. It is recommended that the two titles *Diseases of the bones* and *Diseases of the joints* be amalgamated under a title to be called *Diseases of the bones and joints*. A footnote should follow the title explaining that it does not include rheumatism and tuberculosis; also that where diseases of the bone affect structures connected with

the special senses—nasal fossae, ear, orbit—they are referred to the appropriate headings covering diseases of these organs of special sense. The title is in the acceptable class without autopsy.

2. Of the terms now included under this title heading, the following only are approved as acceptable inclusions: *Caries of bone, circumscribed periostitis, diffuse periostitis, gangrene of bone, infective osteomyelitis, infective periostitis, necrosis of bone* (site specified), *osteitis deformans, osteomyelitis, osteoperiostitis, periostitis* (site specified), *spontaneous fracture of bone, suppurative osteomyelitis* (site specified), *suppurative periostitis* (site specified), *tumor of bone* (site specified).

3. The committee recommends the transfer of the following terms to title No. 76 (*Diseases of the ears*): *Abscess of mastoid process, disease of mastoid cell, empyema of mastoid process, mastoid abscess, mastoiditis, necrosis of mastoid*; it further recommends the transfer of the following terms to title No. 86 (*Diseases of the nasal fossae*): *Abscess of antrum of Highmore, abscess of ethmoidal sinus, abscess of frontal sinus, abscess of maxillary sinus, abscess of sphenoidal sinus, disease of frontal sinus, empyema of frontal sinus, ethmoidal sinusitis, ethmoiditis, frontal sinusitis, maxillary sinusitis, necrosis of antrum, sphenoidal sinusitis, sphenoiditis, suppuration of frontal sinus*, it further recommends the transfer of the following terms to title No. 186 (*Other external violence*): *Foreign body in antrum of Highmore, foreign body in frontal* (and other sinuses); it further recommends the transfer of the term *osteoma* to the list of nonmalignant tumors.

4. The committee recommends the transfer to this title of the following terms from title No. 36 (*Rickets*): *Achondroplasia, osteomalacia, hypertrophic osteoarthropathy, mollities ossium, osteomalacia, pulmonary osteoarthropathy*.

147. Diseases of the Joints (Tuberculosis and Rheumatism Excepted).

1. See conclusions on title No. 146 (*Diseases of the bones*).

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Abscess of joint* (specify joint), *infective synovitis* (site specified), *polyarthritis* (nonvertebral) (site and etiological factor to be specified), *purulent arthritis, purulent synovitis, septic arthritis, suppurative synovitis*.

148. Amputations.

1. The committee recommends that this title be eliminated. The terms included under it are vague and unsatisfactory returns of cause of death. If encountered, they should be queried for the causes for the relief of which the operations were performed and assigned on the basis of information so secured; if no further data can be obtained, they should be classified as deaths of which the causes are not specified, i, e., under present title No. 189.

149. Other Diseases of the Organs of Locomotion.

1. In the opinion of the committee this title should be eliminated and in place of it a title be established under the heading of *Diseases of the muscles*. The new title is acceptable without autopsy. On consideration of the inclusions and of the fact that the title is negligible numerically as a cause of death, the committee wishes to suggest the advisability of eliminating the title and transferring certain inclusions to the new tentative title *Diseases of the bones and joints*, the caption of which would then become *Diseases of the bones, joints, and muscles*.

2. The committee recommends the transfer of *myotonia congenita* and *Thomsen's disease* to title No. 74 (*Other diseases of the nervous system*).

150. Congenital Malformations (Stillbirths Not Included).

1. The committee recommends that subtitle No. 1 (*Hydrocephalus*) be transferred to title No. 74 (*Other diseases of the nervous system*).

2. The following inclusions are approved as acceptable terms for transfer: *Chronic hydrocephalus*, *congenital cerebral tumor*, *congenital hydrocephalus*, *congenital tumor of brain*, *hydrocephalus of brain*, *megaloccephalus*.

3. The committee recommends that the two remaining subtitles (*Congenital malformations of the heart* and *Other congenital malformations*) be merged into a new title to be known as *Congenital malformations*. This is to be the first title in a class formed by merging present Classes X and XI—*Malformations* and *Early infancy*. It is further recommended that the new title (*Congenital malformations*) be placed in the acceptable class without autopsy.

4. Of the terms now included under subtitles 1 and 2 of present title No. 150 (*Congenital malformations*) the following only are approved as acceptable inclusions: *Atelocardia*, *congenital heart disease*, *congenital malformation of heart*, *congenital valvular heart disease*, *cyanosis* (due to malformation of heart), *cyanosis* (persistence of foramen ovale), *cyanosis* (from nonclosure of ductus of Botalli or arteriosus), *morbus caeruleus*, *patent ductus arteriosus*, *patent foramen ovale*, *cerebral hernia* (congenital), *cerebral meningocele*, *cleft palate*, *congenital amputation* (acceptable if part designated), *congenital atresia* (acceptable if part designated), *congenital cystic disease of kidney*, *congenital fracture* (acceptable if designated fully), *congenital imperforate urethra*, *congenital intestinal obstruction*, *congenital laryngeal stenosis*, *congenital pyloric stenosis*, *congenital spina bifida*, *congenital stenosis*, *congenital stenosis of intestine*, *congenital stenosis of larynx*, *congenital tumor* (acceptable if location and nature of, is stated), *ectopia* (acceptable if part stated), *ectopia of bladder*, *ectopia vesicae*, *encephalocoele*, *exstrophy of bladder*, *extroversion of bladder*, *fissure of lip* (harelip), *fissure of palate*, *fissure of spinal column*, *harelip*,

hemicephalus, hydrencephalocele, hydromyelia, hydromyelocele, hydrorhachis, imperforate anus, imperforate pharynx, imperforate rectum, malformation (acceptable if specified; recommend, therefore, elimination of subtitles under malformation), *meningocele, meningomyelocele, microcephaly, omphalocele, podencephalus, spina bifida, spinal hernia, spinal meningocele, syringomyelocele.*

151. Congenital Debility, Icterus, and Sclerema.

1. The committee recommends that present subtitle No. 1 (*Premature birth*) be the second title in the new tentative class, *Congenital malformations and conditions in early infancy*, and that it be placed in the acceptable class without autopsy.

2. Of the terms now included under this subtitle the following only are approved as acceptable inclusions, it being understood that only deaths of infants under 1 year of age are assigned to this heading: *Accidental abortion, immaturity, miscarriage, premature birth, prematurity.*

3. The committee recommends that present subtitle No. 2 (*Congenital debility*) be combined with the second subtitle of present title No. 152 (*Other causes peculiar to early infancy*) and be placed in the unacceptable class without autopsy.

4. Of the terms now included under this subtitle the following only are approved as acceptable inclusions: *Acute catarrhal hepatitis* (under 1 year), *acute catarrhal jaundice* (under 1 year) *acute hepatitis* (under 1 year), *Buhl's disease, congenital cirrhosis of liver* (under 1 year), *congenital sclerema, hematogenous icterus* (under 1 year), *hematogenous jaundice* (under 1 year), *hemorrhagic icterus* (under 1 year), *hemorrhagic jaundice* (under 1 year), *hydrops neonatorum, icterus* (under 1 year), *icterus neonatorum, icterus of newborn, inviability* (under 1 year), *jaundice* (under 1 year), *jaundice of newborn, marasmus* (under 1 year) (consider carefully, when used properly, justifiable term), *edema* (under 1 year), *edema neonatorum, edema of newborn, sclerema* (under 1 year), *sclerema neonatorum.*

5. The committee recommends the transfer of *hepatitis of newborn* to title No. 37 (*Syphilis*).

152. Other Causes Peculiar to Early Infancy.

1. The committee recommends that the above title heading comprehend the two subtitles which now comprise it, namely, *Injuries at birth* and *Other causes peculiar to early infancy*. It is further recommended that the latter subtitle include terms now assigned to present subtitle 2 of present title No. 151 (*Congenital debility*).

2. It is recommended that subtitle No. 1 (*Injuries at birth*) be placed in the acceptable class without autopsy.

3. Of the terms now included under the subtitle *Injuries at birth* the following only are approved as acceptable inclusions: *Breech presentation*, *Caesarean operation*, *cephalematoma*, *cephalic hemorrhage* (at birth), *cerebral compression* (injury at birth), *cerebral hemorrhage* (injury at birth), *cerebral pressure* (injury at birth), *compression during birth*, *compression of brain* (injury at birth), *compression of umbilical cord*, *delayed confinement*, *delayed delivery*, *dystocia*, *foot presentation*, *forced delivery*, *forceps operation*, *hematoma of brain*, *hemorrhage of scalp* (injury at birth), *instrumental delivery*, *malpresentation*, *placenta praevia*, *podalic version*, *prolapse of funis*, *prolapse of umbilical cord*, *prolonged labor*, *protracted dry birth*, *protracted labor*, *rupture of brain* (incident to birth), *strangulation of umbilical cord*, *transverse presentation*, *vectis* (use of), *version*.

4. Of the terms now included under the subtitle *Other causes peculiar to early infancy*, the following only are approved as acceptable inclusions: *Atelectasis*, *atelectasis neonatorum*, *atelectasis of newborn*, *cellulitis of umbilicus* (under 3 months), *gangrene of umbilical cord*, *hemorrhage of funis*, *hemorrhage of navel*, *hemorrhage of newborn*, *hemorrhage of umbilical cord*, *hemorrhage of umbilicus*, *infected navel*, *infected umbilicus*, *infectious omphalitis*, *melena neonatorum* (see 110), *omphalitis*, *phlebitis of umbilicus*, *postnatal asphyxia*, *septicemia from naval*, *septicemia of umbilicus*, *Winckel's disease*. These inclusions should be considered acceptable without autopsy.

5. The committee recommends the transfer of the following terms from other titles: *All terms now listed under title No. 94 (Pulmonary congestion, pulmonary apoplexy) when reported for infants under 3 months of age*; *melena* from title No. 110 when reported for infants under 3 months of age, *exposure to cold* (under 3 months) and *lack of care* (under 3 months) from present title No. 153 (*Lack of care*).

6. The committee recommends the transfer of the term *hemophilia neonatorum* from this title to title No. 55 (*Other general diseases*).

153. Lack of Care.

1. It is recommended that this title be eliminated. Deaths of infants from abandonment should be included under deaths from homicides, and those reported as due to ignorance of the parent should be included under title No. 152 (*Other causes peculiar to early infancy*).

2. Of the terms now included under this title heading, the following only are approved for transfer to other titles as acceptable inclusions: *Desertion* (newborn) to title No. 184 (*Homicide by other means*), *exposure to cold*, *lack of care* to title No. 152, subtitle No. 2 (*Other causes peculiar to early infancy*).

154. Senility.

1. The committee considers this a very unsatisfactory title and not acceptable as a cause of death without autopsy. It should always be queried for the *disease causing death*, as it is too often used on death certificates of elderly persons whose deaths should have been reported as due to diseases of various organs.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Morbus senilis*, *old age*, *senile dementia*, *senile insanity*, *senile paresis*, *senile psychosis*.

Conclusions on Suicides as a Class.

The committee has been advised that no death is classified in the annual mortality statistics published by the Bureau of the Census as a *suicide* unless the *fact* of suicide is shown, either on the transcript of the death certificate as received by the bureau or through information obtained by an inquiry sent out to determine the matter. The committee desires to express its approval of this practice.

155. Suicide by Poison.

1. It is suggested that the name of this title be changed to *Suicide by ingestion of poisonous solids and liquids*. It is in the acceptable class without autopsy if the character of the solid or liquid is specified.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Poisoning* (suicidal), *suicide by poison* (any solid or liquid).

156. Suicide by Asphyxia.

1. It is recommended that the name of this title be changed to *Suicide by inhalation of poisonous gases* and that it be placed in the acceptable class without autopsy if the character of the gas is specified.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Suicide by asphyxia* (any gas or vapor), *suicide by carbon monoxide*, *suicide by chloroform* (vapor), *suicide by gas* (any gas), *suicide by illuminating gas*, *suicide by inhalation of gas* (any gas or vapor), *suicide by suffocation* (any gas or vapor).

157. Suicide by Hanging or Strangulation.

1. The committee recommends that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Suicide by hanging*, *suicide by strangulation*.

158. Suicide by Drowning.

1. The committee recommends that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Suicide by drowning, suicide by submersion.*

159. Suicide by Firearm.

1. The committee recommends that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Suicide by firearm, suicide by shooting.*

3. The committee recommends the addition of the term *suicide by gunshot wound.*

160. Suicide by Cutting or Piercing Instrument.

1. The committee recommends that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Suicide by cutting instrument, suicide by cutting throat, suicide by piercing instrument.*

3. The committee recommends the addition of the following terms: *Suicide by cutting artery, suicide by cutting blood vessel.*

161. Suicide by Jumping from High Place.

1. The committee recommends that this title be merged with present title No. 163 (*Other suicides*). It is acceptable, without autopsy.

2. The committee approves the retention as an acceptable inclusion of the only term now listed, *suicide by jumping from high place.*

162. Suicide by Crushing.

1. The committee recommends that this title be merged with present title No. 163 (*Other suicides*). It is in the acceptable class, without autopsy.

2. Of the terms now included under this title heading all are approved as acceptable inclusions: *Suicide by crushing, suicide by jumping before train, suicide by jumping before other vehicles.*

163. Other Suicides.

1. The committee recommends that this title be considered acceptable, without autopsy.

2. The committee recommends that registration and compiling offices query all reports of *Suicide*, without further qualification, to

ascertain the manner of death or the means employed. With this information *each* death covered by this return can be classified under one of the titles relating to suicide by specified means.

3. It is the recommendation of the committee that present titles 161 and 162 be merged with this title.

4. Of the terms now included under this title the following only are acceptable inclusions: *Suicide* (unqualified), *suicide by burns*, *suicide by fire*, *suicide by scalds*.

164. Poisoning by Food.

1. This title should be considered unacceptable without supporting data either as to a group of accompanying cases or the ingestion of the particular poisonous substances.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Botulism*, *cheese poisoning*, *egg albumen poisoning*, *fish poisoning*, *meat poisoning*, *milk poisoning*, *mushroom poisoning*, *pork poisoning* (not due to trichinosis), *potato poisoning*, *sausage poisoning* (not due to trichinosis), *shellfish poisoning*.

165. Other Acute Poisonings.

1. It is recommended that the caption of this title be changed to *Other acute accidental poisonings* (gas excepted). This title, in the opinion of the committee, should be considered unacceptable without autopsy unless there are supporting data, and all returns which do not specify that the poisoning was accidental should be queried by registration and compiling offices. In this way many reports will be found to represent cases that are properly chargeable to suicide or homicide.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Accidental poisoning* (only when kind of poisoning is specified), *acute ergotism*, *acute poisoning* (only when kind of poison is specified), *opium narcosis*, *poisoned wound*, *poisoning*, *serum intoxication*, *serum poisoning*.

N. B.—All of the above to be qualified to show accidental character.

3. The committee recommends the transfer of the following terms to title No. 176 (*Injuries by animals*): *Bite of insect*, *bite of venomous serpent*, *bite of viper*, *snake bite*, *venom of animal*, *venom of centipede*, *venomous bite*.

4. It is recommended that the following footnote be added: This title does not include poisonings or infections caused by animals.

166. Conflagration.

1. The committee recommends that this title be considered acceptable without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Conflagration* (to include all injuries of whatsoever nature resulting therefrom), *crushed at fire* (conflagration), *inhalation of smoke* (burning building), *jumped from burning building*, *suffocation* (burning building).

3. The committee recommends that the following terms be added to the list of inclusions: *Prairie fire*, *forest fire*.

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

167. Burns (Conflagration Excepted).

1. The committee recommends that the name of this title be *Accidental burns* and that it be placed in the acceptable class, but that returns of *Burns* be queried to determine whether they were received in burning buildings or otherwise; also that a footnote be added stating that it does not include deaths from burns received in burning buildings.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Burn* (conflagration excepted, of any organ or part), *burn by boiling liquid*, *burn by boiling water*, *burn by coal oil*, *burn by corrosive substance*, *burn by fire*, *burn by gasoline*, *burn by kerosene*, *burn by petroleum*, *burn by steam*, *burn by sulphuric acid*, *burn by vitriol*, *effects of corrosives*, *explosion of lamp*, *lamp accident*, *scald* (of any part of body), *scald by steam*.

3. The following terms, now listed under this title heading, should, in the opinion of the committee, be classified under title No. 186 (*Other external violence*) if encountered; they are seldom, if ever, causes of death: *Dermatitis actinica*, *dermatitis ambustionis*, *effects of radium*, *effects of X rays*.

4. The committee recommends that the term *burn by molten metal* be added to the list of inclusions.

5. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

168. Absorption of Deleterious Gases (Conflagration Excepted).

1. It is recommended that the name of this title be changed to *Accidental inhalation of poisonous gases*; that it be placed in the acceptable class without autopsy, and that it be followed by a footnote stating that it does not include deaths in burning buildings. The committee also recommends that all reports that do not specify that the poisoning was **accidental** be queried by registration and compiling offices. In this way many returns will be found to represent cases that are properly chargeable to suicide or homicide.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Accidental asphyxia* (gas to be stated), *acetylene poisoning*, *acute etherism*, *ammonia poisoning*, *amyl nitrite poisoning*, *anesthesia chloroform*, *anesthetic*, *anesthetic for operation* (unqualified), *asphyxia* (accidental), *asphyxia by fumes*, *asphyxia by gas* (accidental), *asphyxia by smoke* (conflagration excepted), *bisulphide of carbon poisoning*, *carbon bisulphide poisoning*, *carbon dioxide poisoning*, *carbon monoxide poisoning*, *charcoal fumes*, *chloroform* (vapor), *choke damp poisoning* (not in mines), *coal-gas poisoning*, *cordite poisoning* (vapor), *cyanogen poisoning*, *delayed chloroform poisoning* (vapor), *ether* (vapor), *hydrogen sulphide*, *illuminating gas*, *laughing gas*, *marsh gas*, *nitrous oxide*, *noxious vapors or effluvia* (including those produced by explosives), *sewer-gas poisoning*, *sewer poisoning*, *suffocation* (unqualified), *suffocation* (by abnormal atmospheric pressure), *suffocation by smoke* (conflagration excepted), *sulphuretted hydrogen*, *water gas*.

3. The committee recommends the transfer of the following terms to title No. 186 (*Other external violence*): *Overlain*, *suffocation* (unqualified), *suffocation by abnormal atmospheric pressure*.

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

169. Accidental Drowning.

1. The committee recommends that this title be placed in the acceptable class, without autopsy, but suggests that returns of *Drowning* be queried to determine whether the death was accidental, suicidal, or homicidal.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Accidental drowning*, *accidental submersion*, *asphyxia by drowning*, *drowning* (unqualified), *found drowned* (open verdict), *lost at sea*, *suffocation by drowning*, *suffocation by submersion*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

170. Traumatism by Firearm.

1. In the opinion of the committee the name of this title should be *Accidental traumatism by firearms*. This title is not acceptable without supporting data, such as site and extent of injury. The committee also recommends that all reports that do not specify that the traumatism was accidental be queried by registration and compiling offices to determine whether death was accidental, suicidal, or homicidal.

2. All of the following terms as now included may be accepted as properly chargeable to this title if no further information be obtainable, but each should be defined as accidental, otherwise there is always doubt as to correct classification: *Accidental wound by firearms* (of any part of body), *firearms*, *gunshot*, *pistol wound*, *shooting*, *shot traumatism by firearms*, *wound by firearms*.

171. Traumatism by Cutting or Piercing Instrument.

1. The committee recommends that the title be called *Accidental traumatism by cutting or piercing instrument*, and that it be considered unacceptable, without supporting data, such as site and extent of injury. It is also recommended that all reports that do not specify that the traumatism was accidental be queried by registration and compiling offices to determine whether death was accidental, suicidal, or homicidal.

2. All of the following terms, as now included, may be accepted as properly chargeable to this title, if no further information is obtainable, but each should be defined as accidental; otherwise there is always doubt as to correct classification. *Cut* (of any part of body), *incised wound* (of any part of body), *knife cut*, *knife stab* (accidental), *punctured wound* (of any part of body), *stab wound* (of any part of body, accidental), *traumatism by cutting instrument*, *traumatism by piercing instrument*, *wound by cutting instrument* (of any part of body), *wound by piercing instrument* (of any part of body).

3. The committee recommends the transfer of the term *circumcision* to this title from present title No. 127 (*Nonvenereal diseases of the male genital organs*).

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

172. Traumatism by Fall.

1. The committee recommends that the name of this title be changed to *Accidental fall* and that it be placed in the acceptable class.

2. All of the following terms as now included under this title are approved as acceptable inclusions: *Accidental fall*, *fall down stairs*, *fall from horse*, *fall in ship*, *fall into hold* (ship, etc.), *injury by diving*, *injury from fall*, *traumatism by falling*.

3. The committee recommends that a footnote be added stating that this title does not include accidents connected with traffic, in burning buildings, or in mines or quarries.

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

173. Traumatism in Mines and Quarries.

1. It is recommended that this title be called *Accidents and injuries in mines* and be placed in the acceptable class.

2. It is further recommended that a new title be established to be called *Accidents and injuries in quarries*; for the present it may be referred to as 173A, *q. v.*

3. Of the terms now included under present title No. 173 the following are approved as acceptable inclusions for the title *Accidents and injuries in mines*: *Accident in mine, asphyxia by gas in mine, choke damp* (unqualified), *explosion of fire damp, fall in pit* (mine), *fall in shaft* (mine), *fall of coal* (mine), *injury by mining machinery, injury by wagon in mine, injury in mine, mining accident, traumatism in mine.*

4. The committee recommends that this title be subdivided into (a) *Injuries by falls*, (b) *Injuries by falling bodies*, (c) *Explosions, asphyxia, and suffocation*, (d) *Injuries by mining machinery and vehicles*, (e) *All other accidents and injuries in mines.*

173a. Accidents and Injuries in Quarries. (Tentative new Title).

1. It is recommended that this tentative new title be placed in the acceptable class.

2. Of the terms now listed under present title No. 173, the following are approved as acceptable inclusions for the title *Accidents and injuries in quarries*: *Accident in quarry, fall in pit* (quarry), *fall of stone* (quarry), *injury in quarry, traumatism in quarry.*

174. Traumatism by Machines.

1. The committee recommends that this title be placed in the acceptable class.

2. Of the terms now included under this title heading the following are approved as acceptable inclusions: *Accidental fall of machinery, caught in shafting, crushed by traveling crane, injury by machinery, traumatism by machinery.*

3. The committee recommends the transfer of the terms *elevator accident* and *traumatism by passenger elevator* from this title to new tentative title No. 175 (*Transportation and other vehicular accidents—subdivision (c) Other vehicles*).

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

175. Traumatism by Other Crushing.

1. The committee recommends that the name of this title be changed to *Transportation and other vehicular accidents*, that it be placed in the acceptable class and be subdivided as follows (a) *Accidents and injuries on steam railroads*, (b) *Accidents and injuries on street cars,*

(c) *Automobile accidents and injuries*, (d) *Water transportation accidents and injuries*, (e) *Other vehicular accidents and injuries*.

2. Of the terms now included under present title No. 175 (*Traumatism by other crushing*) the following only are approved as acceptable inclusions for the several subtitles noted above: *Automobile accident*, *bicycle accident*, *bicycle injury*, *crushing by bumpers*, *cycle accident*, *derailment*, *earthquake*, *electric railway accident*, *elevated railway accident*, *fall from car or engine*, *fall from carriage*, *fall from or with aeroplane*, *fall from or with balloon*, *fall from or with parachute*, *injury getting off car or engine*, *interurban railway accident*, *kiiled on railroad*, *landslide*, *motor cycle accident*, *railroad accident*, *run over by automobile*, *run over by car*, *runaway accident*, *street car accident*, *street railway accident*, *struck by automobile*, *struck by car or engine*, *subway accident*, *surface car accident*, *thrown from automobile*, *traumatism by aeroplane*, *traumatism by automobile*, *traumatism by balloon*, *traumatism by crushing*, *traumatism by electric railroad*, *traumatism by landslide*, *traumatism by other crushing*, *traumatism by railroad*, *traumatism by street railroad*, *traumatism by vehicle* (carriage, wagon, bicycle, etc.), *trolley accident*.

3. The committee recommends that the terms *elevator accident* and *traumatism by passenger elevator* be transferred to this title (subtitle e) from present title No. 174 (*Traumatism by machines*).

4. The committee recommends the transfer of the terms *crushing*, *earthquake*, *landslide*, *traumatism by crushing*, *traumatism by landslide*, *traumatism by other crushing*, *wound by crushing*, to title No. 186 (*Other external violence*).

5. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon occupation of decedent.

176. Injuries by Animals.

1. It is the recommendation of the committee that this title be placed in the acceptable class, without autopsy.

2. All of the following terms, as now included under this title heading, are approved as acceptable inclusions: *Bite* (of any animal), *dog bite*, *gored*, *injury by any animal* (due to viciousness), *kick* (by horse or other animal), *traumatism by horses* (due to viciousness).

3. The committee recommends that the terms *bite of insect*, *bite of venomous serpent*, *bite of viper*, *snake bite*, *venom of animal*, *venom of centipede*, *venomous bite* be transferred to this title from present title No. 165 (*Other acute poisonings*).

The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

177. Starvation.

1. It is recommended that the name of this title be changed by adding parenthetically the words *deprivation of food or water*; it is an acceptable statement of cause of death without autopsy, but, owing to the fact that the word is sometimes used on death certificates in cases where the "*starvation*" was due to malnutrition from disease, the report should always be queried by registration and compiling offices. *Only* deaths from actual privation (deprivation of food or water) are assignable to this title.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Deprivation of water, hunger, inanition* (starvation), *insufficient nourishment, privation, starvation, thirst*.

178. Excessive Cold.

1. In the opinion of the committee this is an acceptable title, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Effects of cold* (temperature), *exposure to cold* (3m+), *freezing, frostbite, frozen*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

179. Effects of Heat.

1. It is recommended that this title be placed in the acceptable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved as acceptable inclusions: *Effects of heat in engine room, effects of heat in laundry, etc., excessive heat, heat apoplexy, heat cramps, heat prostration, heat stroke, insolation, overheated, sunstroke, thermic fever*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

180. Lightning.

1. It is recommended that this title be placed in the acceptable class, without autopsy.

2. The term *lightning*, the only inclusion listed under this title heading, is approved as acceptable.

181. Electricity (Lightning Excepted).

1. It is recommended that this title be placed in the acceptable class, without autopsy.

2. All of the terms now included under this title heading are approved as acceptable inclusions: *Accidental electric shock, acci-*

dental electrocution, electric shock, electricity (lightning excepted), *injury by electric shock*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

Conclusions on Homicides as a Class.

The committee has been advised that no death is classified as a *homicide* in the annual mortality statistics published by the Bureau of the Census unless the *fact* of homicide is shown, either on the transcript of the death certificate as received by the bureau or through information obtained by inquiry sent out to determine the matter. The committee desires to express its approval of this practice.

182. Homicide by Firearms.

1. It is recommended that this title be placed in the acceptable class, without autopsy.

2. All of the terms now included under this title heading are approved as acceptable inclusions: *Assassination by firearms, gunshot* (homicidal), *homicide by firearms, homicide by gunshot, shooting* (homicidal), *shot* (homicidal), *shot by burglar, shot in duel, wound by firearms* (homicidal).

183. Homicide by Cutting or Piercing Instruments.

1. It is recommended that this title be placed in the acceptable class, without autopsy. It is further recommended that the last word in the title be changed to the singular form.

2. All of the terms now included under this title heading are approved as acceptable inclusions: *Assassination by cutting or piercing instrument, cut* (homicidal), *homicide by cutting instrument, homicide by piercing instrument, knife cut* (homicidal), *knife stab* (homicidal), *wound by cutting instrument* (homicidal).

184. Homicide by Other Means.

1. The committee recommends that this title be placed in the acceptable class without autopsy.

2. The committee desires to call attention to the fact that, strictly speaking, no term at present listed under this title heading is acceptable unless the means or instrument used and fact that the violence was homicidal are specified. If these data are not specified the report should be queried to determine whether the death was not one assignable to title No. 182 (*Homicide by firearms*) or to title No. 183 (*Homicide by cutting or piercing instruments*). With these restrictions, and with the understanding that some of these terms are acceptable only as methods of violence that *may* be homicidal the following list under this title is printed here: *Assassination* (without

further explanation), *bite of human being*, *duel*, *homicidal poisoning*, *homicidal wound*, *homicide* (unqualified), *incendiarism*, *infanticide* (unqualified), *killed in fight*, *lynching*, *manslaughter*, *murder* (unqualified), *throwing of sulphuric acid*, *throwing of vitriol*, *traumatism* (homicidal), *wound* (homicidal).

3. The committee recommends the addition of the following term to the list of inclusions: *Homicidal strangulation*.

4. The committee recommends that a new title be established to be known as *Criminal abortion*. For the present this may be numbered 184X, *q. v.* It is recommended that the term *criminal abortion* (death of mother or child) be transferred to this title.

5. The committee recommends the transfer to this title of the term *desertion* (newborn) from present title No. 153 (*Lack of care*).

184X. Criminal Abortion. (Tentative new title).

1. The committee recommends that a new title be established under the above caption and that it be subdivided into (A) *Induced by instrument or drug*, (B) *Self induced by instrument or drug*, (C) *Induced by another person by instrument or drug*, and that each subtitle be acceptable without autopsy.

2. The committee recommends the transfer to this title of the following term from present title No. 184 (*Homicide by other means*): *Criminal abortion* (death of mother or child).

185. Fractures (Cause Not Specified).

1. The committee recommends that this title be eliminated and that such reports as can not, on inquiry, be classified under more definite titles, be assigned to title No. 186 (*Other external violence*).

186. Other External Violence.

1. In discussing this title the committee desires to call attention to the following headnote in the Manual of the International List of Causes of Death:

"NOTE.—This is the residual title for external causes. Many indefinite returns found here could be assigned elsewhere if the means of death and the character of violence (accidental, suicidal, or homicidal) were stated. Deaths from legal execution and war are also included, and may be stated separately if deemed desirable."

It is evident that no "blanket" recommendation can be made as to its acceptableness or nonacceptableness without autopsy.

2. Of the terms now included under this title heading the committee approves as acceptable inclusions only such terms as, first, are so defined as to identify them, when used on death certificates, as covering cases of *death by legal execution*, or *death incidental to war*, and, second, such terms as are so defined as to identify them, when used on death certificates, as both *accidental* and *caused by*

means deaths from which are not assignable to any title of the International List relating to any other specified form of violence. In other words, no inclusion under this title heading is acceptable that might conceal a death from homicide, suicide, or well-defined accidental violence assignable elsewhere. The following are approved as acceptable inclusions: *Battle, capital punishment, electrocution* (legal execution only), *execution, football accident, hanging* (legal execution only), *killed in cyclone*.

3. The committee realizes, in making the above recommendation, that as this is a residual title, and as such necessarily a more or less indefinite title, deaths reported from ill-defined violence concerning which no definite information is obtained on inquiry must be assigned thereto.

4. The committee has been advised that it is the practice of the Bureau of the Census, so far as practicable, to query all of the unsatisfactory statements listed under this title heading in an effort to obtain data justifying their classification under more definite headings, and desires to express its approval of this practice.

5. The committee recommends the addition of the following terms to the list of inclusions: *Boxing bout, foot race, competitive athletics, athletic competition*,

6. The transfer of the following terms to this title from other titles is recommended: *Traumatic pneumonia* from title No. 92 (*Pneumonia*); *traumatic peritonitis, foreign body in peritoneum* from present title No. 117 (*Simple peritonitis*); *traumatic encephalitis and traumatic inflammation of brain* from present title No. 60 (*Encephalitis*); *traumatic metritis, rupture of uterus* (nonpuerperal) from title No. 130 (*Other diseases of the uterus*); *foreign body in bladder* from title No. 124 (*Diseases of the bladder*); *foreign body in esophagus* from title No. 101 (*Diseases of the esophagus*); *foreign body in stomach* from title No. 103 (*Other diseases of the stomach*); *foreign body in urethra* from title No. 125 (*Diseases of the urethra, urinary abscess, etc.*); *foreign body in frontal sinus, maxillary sinus, accessory sinus, antrum of Highmore* from present title No. 146 (*Diseases of the bones*); *foreign body in intestine, rectum*, from title No. 110 (*Other diseases of the intestines*); *landslide, earthquake, crushing* (unqualified), *overlain, suffocation* (unqualified), *suffocation by abnormal atmospheric pressure* from title No. 168 (*absorption of deleterious gases—conflagration excepted*), *traumatism by crushing* (unqualified), *traumatism by landslide, traumatism by other crushing, wound by crushing* from present title No. 175 (*Traumatism by other crushing*), *traumatic orchitis* from present title No. 127 (*Nonvenereal diseases of the male genital organs*).

187. Ill-Defined Organic Disease.

See conclusions on title No. 189.

188. Sudden Death.

See conclusions on title No. 189.

189. Not Specified or Ill-Defined.

1. The committee recommends that present titles Nos. 187 (*Ill-defined organic disease*) and No. 188 (*Sudden death*) be merged with this title and that it be placed in the unacceptable class without autopsy.

2. The inclusions constitute a mass of ill-defined and unsatisfactory terms, none of which are acceptable in the ordinary sense, but all of which, in view of their very indefiniteness, the committee realizes must be included here when no definite information can be secured on inquiry.

3. The committee is advised that the Bureau of the Census and many States and municipal registration offices are making determined efforts to secure more definite data when such returns are received, and desires to express its approval of this practice. It realizes that, until all such reports are eliminated, they must be classified somewhere, and that, therefore, under present conditions, this title must remain in the list.

4. On account of their indefiniteness it recommends the transfer to this title of the term *neuralgia* from title No. 73 (*Neuralgia and neuritis*) and of the terms now included under titles 70 and 71 (*Convulsions, nonpuerperal, and Convulsions of infants*).

PLAGUE-PREVENTION WORK.

CALIFORNIA.

The following report of plague-prevention work in California for the week ended August 19, 1916, was received from Senior Surg. Pierce, of the United States Public Health Service, in charge of the work:

FEDERAL AND COUNTY INSPECTION SERVICE.

[For the enforcement of the law of June 7, 1913.]

Counties.	Inspections.	Reinspections.	Acres inspected.	Acres reinspected.	Acres treated.		Holes treated.
					Waste balls.	Grain.	
Alameda.....		127		34,054		3,878	
Contra Costa.....		73		22,399	25	1,597	
Stanislaus.....	66	68	14,687	28,116	415	8,571	500
San Benito.....	65	36	22,698	18,490		13,552	
Santa Cruz.....		33		6,106		3,209	
Merced.....	32	19	39,535	2,365		2,045	
Monterey.....	44	20	43,799	12,061	100	6,776	1,206
Santa Clara.....	34	13	7,942	3,279		973	
San Mateo.....	19		343				
Total.....	260	389	128,974	128,870	540	40,401	1,700